
THE NEW PSYCHOLOGY

F. BOYD BARRETT S. J.

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THE NEW PSYCHOLOGY

BOOKS BY THE SAME AUTHOR

STRENGTH OF WILL

THE WILL TO WIN

MOTIVE FORCE AND MOTIVATION TRACKS

THE NEW PSYCHOLOGY

How It Aids and Interests

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PREFACE

AMONG the many books written on the New Psychology there are few, very few, that are not offensive to Christians. Many of the new psychologists quite unnecessarily offend the susceptibilities of those who believe in Christ and who love the religion and moral code that are founded on His teaching. In thus insulting Christians they bring discredit on themselves and make their scientific investigations suspect. Anti-religious animus and prejudice should have no place in truly scientific minds.

In this volume we propose to discuss the chief doctrines and the methods of the New Psychology, putting them in a fair and even sympathetic spirit, to the test of the principles of sane psychology. And at the same time we have in mind the presentation of the New Psychology in a manner that will be inoffensive to Christians and useful to clergymen, educators and students of medicine, law and arts.

For the most part the psychology contained in this volume is *descriptive psychology*. There are, no doubt, many inaccuracies and exaggerations. The method is not so strict nor so rigid as that of metaphysical, rational psychology. While it would be a serious error, fraught with dangerous consequences, to write inaccurately of the freedom of the

will or of the spirituality of the soul, it is a matter of much less moment to overestimate the importance of hypnotism, or to praise too highly a method of dealing with hysteria. Error as to metaphysical truth tends directly to undermine religion and faith. Error in empirical and descriptive psychology is easily detected, and of less serious moment.

This book is written, as far as possible, in the spirit of the great Cardinal Mercier, whose avowed purpose was to keep scholastic (*i.e.*, Christian) psychology in close touch with the natural sciences. In the preface to his *Psychology* he writes as follows:

“The very best service one can render to the general doctrines of scholastic psychology is to establish a relation between them and the acquired results of cellular biology, histology, and embryology, and to simplify, as far as possible, psychical factors as the English associationists have done. One must seek to understand the adult man through the study of animal and child psychology. One must study the normal man in the light of minute observations of exceptional and pathological states, which bring into evidence more and more, some bizarre characteristic of the normal type. One must study particular modifications and variations in human activity in different races and in different epochs of history, as Herbert Spencer has done. In fine one must take one’s place in the movement oriented by the psychological researches of the German school.”

To write in the spirit of a biologist lays one open

to misunderstanding. And not a few are startled by references to animal psychology. It may be that some pages in the present volume will at first sight cause surprise. If, however, it be clearly understood that it is never implied that the animal soul is of like nature with the human soul such surprise should disappear. The soul of man is rational, and a spiritual substance. The animal soul is neither rational nor substantial. The soul of man can no more evolve from the animal soul than religion can evolve from convention, or life from inorganic matter. An essential difference exists ever and always between rational knowledge and sense knowledge, religion and convention, a rational soul and an animal soul.

The theories of the New Psychology which I put forward as acceptable are those which seem to fit observed facts well and satisfactorily. They remain hypotheses. In time, many of them will give place to better hypotheses. For such theories no rigid, convincing proofs are forthcoming. But science needs good *hypotheses* on which to work, and it is hardly fair, in a new and progressing science, to expect convincing proofs. Many of the theories regarding "Dream Interpretation," "Auto-suggestion," and "Telepathy" are nothing more than good working hypotheses. No scientist absolutely pins his faith to the ultimate veracity of such theories. "Proofs" often consist of little more than progressive assertion based on observations.

In conclusion I wish to apologize for a certain disconnectedness in this volume, and for much repetition. And I feel I must heartily and sincerely thank the Reverend Joseph Keating, S.J., the editor of *The Month*, for his unfailing kindness to me and the encouragement he has given to me, and for allowing me to reproduce in this volume articles on the New Psychology which first appeared in *The Month*.

E. BOYD BARRETT, S.J.

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THE NEW PSYCHOLOGY

CHAPTER I

PSYCHOLOGY — OLD AND NEW

CATHOLIC or Scholastic¹ Psychology has a right to be proud of its achievements. It has, in the first place, defined and demonstrated, with extraordinary lucidity and accuracy, the nature and chief functions of the soul. It has proved the soul to be a spiritual substance, at once the principle of life and the principle of knowledge. It has shown that the soul is immortal and the will free — truths of infinite human significance and importance. In the second place, scholastic psychology has always proved a fearless, acute and trustworthy critic of false doctrines and theories. Clarity and precision in the definition of terms has saved it from many errors into which its adversaries have fallen. Quite recently Professor Spearman, perhaps the most brilliant of modern psychologists, while lamenting the confusion of thought and terms in modern psychology, wrote: "And from none, perhaps, better than the old commonly despised scholastic authors can the prime lesson be learnt that

¹ *Scholastic* — from the "school-men" of the Middle Ages, such as St. Thomas of Aquin, who perfected the psychology and philosophy of Aristotle.

before attempting to argue upon points of fact, there should first of all be obtained definite and unequivocally expressed ideas.”² The same writer, brushing aside the narrow and ignorant prejudices that still exist against scholastic psychology, continues: “Scholasticism is still very far from extinct; in fact, it appears about to enter upon a phase of great revival; and in any settlement of the meaning of intelligence, it possesses an indubitable claim to be heard before all others.”³

Scholastic psychology, having established itself as no other system of psychology is established on a solid and impregnable basis of truth, is in an ideal position to assimilate and utilize to the full all new scientific data. “Scholastic psychology alone,” wrote Cardinal Mercier,⁴ “possesses at once a systematized body of doctrines, and a framework sufficiently capacious to embrace and synthesize the ever-increasing results of the observational sciences.” Modern psychology, on the other hand, remains lamentably in want of wide, general conceptions and directive ideas. Professor Spearman frankly admits and deplores the deficiency, while making a brilliant effort to remedy it. He bewails too the failure of modern psychologists to gather in and utilize the results of experimental investigations carried on in so many laboratories.

Meanwhile, scholastic psychology, thanks to the

² *The Nature of Intelligence and the Principles of Cognition*, p. 23 (Macmillan, 1923), by C. Spearman, Grote Professor, Univ. of London. ³ *Op. cit.*, p. 22. ⁴ *Préface Psychologie*.

work of Cardinal Mercier (the School of Louvain), Father Fröbes, S.J., Father Maher, S.J., and others, has striven to keep in touch with the advances of modern science, and to avail itself of its unquestionably useful method.⁵ It has not remained stagnant, satisfied with its past achievements. "Is it to be said," wrote Cardinal Mercier,⁶ "that we regard scholastic psychology as a finished work of science, before which the mind is to pause in sterile contemplation? Evidently not! Psychology is a living science. *It must evolve with the sciences of biology and anthropology, which are its tributaries.* Arrest of development is for a living thing a fatal cause of anomalies and monstrosities."

We shall have occasion later on to dwell upon the close inter-connection between psychology and biology; for the moment we shall make a digression with a view to emphasizing the connection between psychology and other natural sciences in the study of *sensation*. We do so with a view to indicating the disadvantages under which a psychologist labors if he is not acquainted with physics, chemistry and physiology.

The study of *sensation* is a first step in psychology. From sense-knowledge all our knowledge is ultimately derived. It is of primary importance to grasp clearly how we get into touch with the outer world through the senses.

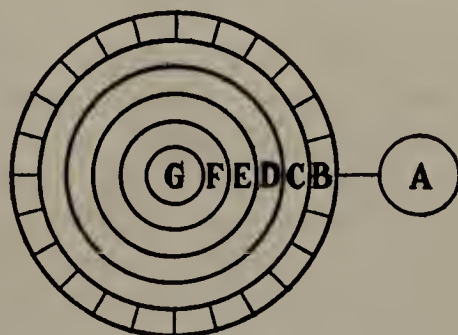
⁵ Modern scholastics in France, Belgium, Germany and Italy are among the leaders in empirical psychology.

⁶ Cf. Preface to his *Psychology*.

There is nothing in the intellect but what comes originally from the senses. ("Nil in intellectu quod non prius fuit in sensu.") The understanding then of sensation is all important. As an example let us take the genesis of the sensation *greenness*, derived, let us suppose, from a green field. The external object, the "green" of the field, first of all acts on the nerve terminals by means of ether waves. This transmission of what we may call the germ of the ultimate knowledge is by means of vibrations. The comprehension of this stage belongs to the *science of physics*, as indeed does the understanding of the complicated mechanism of the eye. The next stage belongs to the *science of chemistry*, biological chemistry; for the reaction of the nerve terminals to the vibrations is, partly at least, chemical. Here the germ of the ultimate knowledge is contained in chemical reactions. These first two stages are qualitatively different. Next there follows along the line of afferent nerve fibres a mysterious impulse, a vital movement, the study of which belongs to *physiology*. There are thermal, electrical, physical and chemical changes in the nerve fibres during the transmission of the impulse, but these changes do not constitute the impulse. It is something other, something over and above. Next there follows in the sensorium a further chemical change of a most delicate and complicated kind. Here the natural sciences stop. Their part in tracing the path of that ever-changing, elusive germ

of subsequent knowledge is over. Matter now affects mind. And, as a last stage, the sensation "greenness" is experienced. But modern psychological research has still much to say. And not a few important observations have been made of a kind to show that the "greenness," as it appears to us, is only a modified form of the "greenness" initially experienced at the last stage of the processes described. Without an understanding of physics, chemistry and physiology, therefore, one cannot have an adequate conception of the objective value of sensations; nor is one in a position to discuss in a competent way the objectivity of cognition. The eventual effect of the external object on consciousness, in spite of so many transitional stages which are qualitatively different, is still a true and real likeness to "the thing in itself." By a series of concentric circles the processes might be shown diagrammatically thus:

- A. External object
- B. Ether vibrations
- C. Chemical process in eye
- D. Nerve impulse passage
- E. Chemical process in sensorium
- F. Passage from matter to mind
- G. "Greenness" in consciousness.



The close connection between psychology and the natural sciences might be illustrated even more convincingly by pointing out the dependence of the psychology of the instincts and emotions on biology. But we consider that this matter has been sufficiently emphasized.

The desire to offer some little help to scholastic psychologists to assimilate the more valuable fruits of the work of the "new psychologists," and thus to live up to the enlightened expansiveness of Cardinal Mercier, has inspired the present work. It is not sufficient for scholastic psychology to remain the custodian and guardian of its treasures of knowledge and the vigorous critic of error; it must also grow richer, expand and, to use Cardinal Mercier's word, "evolve." Our purpose, then, is to discuss the advances made by the "New Psychology" with a view to preparing the way for the assimilation into Scholasticism of its best fruits. The "New Psychology" is the result of approaching the study of psychological problems through biology. It is a term applied to the doctrines and theories put forward in books treating of "psycho-analysis," "auto-suggestion," "dreams," "telepathy," "hypnotism," and modern "psycho-therapy" or "mind-healing." Its avowed purpose is to study not only the phenomena of normal minds but also the phenomena of abnormal or diseased minds. It treats much of pathology. Further, not content with studying those phenomena of mind that betray themselves to

consciousness, and that we can introspect, it also sets itself to study mental functioning that goes on without our being consciously aware of it. Indeed, the New Psychology is sometimes called the "Psychology of the Unconscious or Sub-conscious."

To illustrate the new methods and the new points of view in a crude way, let us suppose that some strange animal was known to be behind a tapestry and that the tapestry was opaque and could not be removed.

Now, even under such conditions, by experiment much could be discovered about the animal. Foods could be thrown to it, to test its instincts; its movements could be obscurely studied; its cries noted; its strength measured, and so forth.

Much in the same way, the new psychologists approach the study of the soul, which for them is a living thing behind an opaque, immovable tapestry, the body. They experiment on it from without in a biological spirit, trying the effects of various stimuli.

There is no doubt that the New Psychology has aroused to an enormous extent the interest and attention, not only of the general public but of all thinking men, and has occasioned an immense amount of discussion and controversy. New words, such as "complex," "repression," "projection," "sublimation," "adjustment" and "parataxis" have been coined; new practices, such as "psycho-analyzing" and "sug-

gestioning," have been set afoot; and many new theories and doctrines, good and bad, have been let loose upon a credulous and unthinking public. Sex-theories, in particular, of a sensational and revolutionary kind, some of which emanate from the base materialism of Freud, have won their way into current literature, introducing a revolting realism, and leading many astray.

Catholics who have not had a philosophic training are perplexed by the new theories, nearly all of which are plausible and contain a considerable admixture of truth; while there lies in some of them poison and falsehood. Catholics thus at a loss to distinguish the good from the bad, the scientific and true from the unscientific and false, are anxious to know how far such theories are reconcilable with Catholic psychology and their Catholic Faith. They ask such questions as the following: "Is it lawful for a Catholic to submit to psycho-analytic treatment?" "Is auto-suggestion compatible with the freedom of the will?" "Is it lawful to be hypnotized?" "Is it lawful to have one's dreams interpreted by a neurologist?" "Is telepathy a kind of spiritism?" "Is there a connection between the sex-instinct and religion?" "Is crime usually due to mere mental degeneracy? Is it merely the manifestation of a neurosis?"

There is a further doubt which occurs to the minds of many Catholics. As is well known, the New Psychology has devoted extraordinary atten-

tion to and achieved remarkable success in the cure of nerve troubles. Mind diseases, hitherto ill-understood, have been analyzed and classified in a masterly way, and exceedingly ingenious methods of treatment have been invented for dealing with them. But all such treatment is purely natural. The element of religion does not enter into it. And Catholics who perhaps suffer from "scruples" or obsessions of a partly religious character are in doubt as to whether it is legitimate for them to seek in purely natural means and treatment the cure of their trouble. Other nerve-troubles with which Catholics may be afflicted, which perhaps they know to have a connection with sex-irregularity and sin, raise for them the self-same question. Is it lawful to seek from laymen, even though they be skilled neurologists, advice and guidance which has bearing on their spiritual life?

To answer these and similar questions is within the scope and purpose of the present work. The findings and theories of the New Psychology need to be interpreted in the light of the great Catholic doctrines: the spirituality and immortality of the soul, the freedom of the will, and the efficacy of supernatural grace. Such will be our standpoint, and, far from hampering us, it will only equip us for the work of separating the true from the false, the good and useful from the pernicious.

The spirit of true Scholasticism has ever been broad and progressive, full of joy at real progress in

science, and ever ready to assimilate new discoveries. But, on the other hand, true Scholasticism has ever been the uncompromising opponent of falsehood and error, however bewitchingly it may be attired, and however fascinating and fashionable it may be. Scholasticism has been consistent and honest in opposing at one time the materialism of Hobbes, at another the idealism of Hegel. It has ever held its middle course between extremes, and it can never be coaxed or cajoled into accepting materialism or idealism in order to win the applause of the "advanced" and "enlightened" scientists and "thinkers" of the day. What Scholasticism has never ceased to condemn in Lucretius, it will not hesitate to condemn in Freud. And, on the other hand, Scholasticism, which is founded on the splendid reasoning of the pagan intellect of Aristotle, will not hesitate to accept from the hands even of modern pagans the good fruits that they have culled by their wondrous labors. For to deny for one moment that modern psychologists, the vast majority of whom are non-Catholic, have labored with marvellous skill and tenacity of purpose, and have achieved results of exceeding great value, would be mere prejudice. In every department of biology and experimental psychology they have pursued herculean labors, with a noble enthusiasm for science that should command our deepest admiration. Our part it is thankfully to acknowledge their good

work, assimilate the fruits of their labors, and thus, in the words of Cardinal Mercier,⁷ “render the best service we can to the general doctrines of scholastic psychology.”

⁷ *Préface, Psychologie.*

CHAPTER II

THE APPROACH TO PSYCHOLOGY THROUGH BIOLOGY

SCHOLASTIC PSYCHOLOGY teaches that the soul, the *forma substantialis* of the body, is at once the principle of life and the principle of thought. Every psychical act is a vital act. Thoughts are not only *cognitive*, but they are also *vital*. Sensations, representations and intellections have all a two-fold reference, and can be regarded from the point of view of biology, as due to the principle of life, or from the point of view of epistemology, as due to the principle of thought. They are acts of an organized whole, body and soul, for it is "the whole man" who feels, desires, imagines, thinks. We do not think as bodyless spirits think. Our mental and emotional experiences are vital experiences, and to see in such experiences and in such mental functions as remembering, or paying attention, a biological significance, is perfectly legitimate. The soul, whether exercising vegetative, sentient, or reasoning activities, is still one and the same soul, the *forma substantialis*.

Again, our nature is that of a rational animal. Its animality cannot be denied, even though in much

of our behavior that animality is directed by reason and controlled by a higher spiritual power, the free will. But "animality rationalized" is still animality; its presence is to be found in all our acts, for we must not forget that the body ever accompanies the soul in this life. Our soul, though only *mediately* and *extrinsically* dependent on the body, is still truly dependent on it. Body and mind ever interact and interdepend, the body supplying the basis for the animality that is in us. Hence it is no small help to the understanding of many phases of human conduct to consider similar or kindred conduct in pure animal nature. Animal psychology is of great assistance, as indeed is the modern "behaviorist" psychology, in unravelling mysteries of human passion and instinct. Just as the study of the physiology of animals is a help to the understanding of human physiology, so, though in a lesser degree, the study of animal psychology is a help to the understanding of the psychology of man.

While Scholasticism freely admits that man is an animal, an animal endowed with reason, it is irreconcilably opposed to what may be called the pet theory of biological psychology, that there is a perfect continuity in animal intelligence up to and including the intelligence of man. From lower grades of animal "mind," it is said, there is a continuous progress up to the human mind. Whatever may be said for continuity in nervous systems, and no doubt when we compare the nervous systems of

.

the ascending scale of animal forms this continuity strikes us, scholastics must ever insist on an ultimate discontinuity in the line of intelligence. The animal "mind" is not a spiritual substance; the mind, or soul of man, is a spiritual substance — and there is an unbridgeable gulf between the two types of soul. Without dwelling on this fundamental point of divergence between Scholasticism and materialistic biology, we shall consider how far sane biology can help towards a solution of psychological problems, and the worth of the claims made on behalf of biological psychology.

In the lowliest and simplest forms of animal life, in the amœba, for instance, there is no trace of a nervous system as such, but nevertheless in the protoplasm of this animalcule certain reactions which accompany nervous matter are seen. It is "*irritable*." It reacts to stimuli. And some of the movements of its pseudopodia seem purposeful. Its activities consist in avoiding what is bad for it, and in seeking for food. Whatever "knowledge" it acquires is subservient to self-preservation. Its "*irritability*" is clearly and plainly biological. Its "conduct" is wholly explained by its struggle for life. The problem of heredity in the amœba is simple. It transmits whatever instincts it has by means of the protoplasm it shares with its offspring — for reproduction in the amœba is by simple fission. It divides in two. Where there was one amœba there are, after division, two amœbæ, and

whatever mnemonic modifications of protoplasm existed in the parent amœba are physically shared with the daughter amœbæ. This fact should be of some small help towards solving the problem of heredity in higher animal life.

In the hydra we find traces of a rudimentary nervous system and a rudimentary sensitive defense organ, the nematocyst. With its increased capability of cognition we have more complex reactions, more varied instinctive movements, and two methods of reproduction, one asexual and the other sexual. The "psychology" of the hydra becomes at once more difficult, but there is still every indication of the complete subservience of the cognitive to the biological. The principle of knowledge in the hydra is, as it were, only a function of the principle of life. But its life is larger, more varied and more beset with difficulties than the life of the amœba, and it is endowed with a complex mechanism by which it can attack, poison and stun its prey.

It would be too long to trace through the earth-worm, the star-fish, the dog-fish, the rabbit and the chimpanzee, the ever-developing nervous system, leading to ever-increasing complexity of activities and more subtle phases of instinctive reactions. As the series ascends new parts are added to the brain, more perfect sense organs appear, and more striking adaptations to changes of environment can be seen. With every higher type of central nervous system increas-

ing signs of a kind of "intelligence" manifest themselves, and increased powers are given for the struggle for life and for survival of the species.

Needless to say, experimental biology has not been idle, and not a few interesting results have been established — or have been accepted as well-founded theories. One of the latter theories localizes instinctive emotions and activities in the basal ganglia of the brain. To the cortex or neo-pallium is attributed the associative and higher powers of the animal mind. This localization of function probably applies also to the human brain.

In cases of diseased cortex, human beings relying on the instinctive activities founded physically in the basal ganglia of the brain, act in a manner differing little, if at all, from lower brutes. And there are cases on record of idiots, whose frontal lobes were afterwards found to be quite undeveloped, who could never acquire the power of speech or accomplish any work that called for attention, intelligence or high associative power. On the other hand, higher types of animals, with a well-developed cerebral cortex, have been shown to be possessed of mental faculties closely bordering on intelligence. In the case of Macaques, one experimenter, Mr. Kinnaman,¹ had no difficulty in teaching his Macaques to follow the right path through a labyrinth constructed on the plan of the Hampton Court maze.

¹ Cf. *Instinct and Intelligence*, by N. C. MacNamara, p. 135.

“He placed food in a cage which was closed by an elaborate set of fastenings, which his monkeys had to open before they could gain admission to the cage. The animals soon learned how to open the cage, and evinced no small amount of pleasure when they had successfully completed their task. The question then arose as to whether a Macaque could by watching its companion perform certain movements, and observing the consequence, be able to accomplish a similar set of movements from a desire to effect similar results. The test used consisted of a closed box containing food; this box was fastened by means of a plug; one of the Macaques failed to work the mechanism and gave up trying in despair. Its companion, however, came out of her cage, the first one following her; number two went to the box, pulled the fastening about, and ultimately seized the end of the plug with her teeth and pulled it out of its clasp. The box was again set; the first animal made a rush for it, seized the plug as number two had done, and got her food. She repeated this act several times.”

Scholastic psychology has not, of course, remained indifferent to the results of biological observation, nor has it been behindhand in doing justice to the importance of physiology and the anatomy of the nervous system in the domain of psychology. In many scholastic text-books chapters are devoted to a description of the nervous system, the circulation of the blood, reproduction

and other kindred matters. But at the same time due attention has not yet been paid to the application to psychology of the results of the natural sciences.

Non-scholastic psychologists have not been so behindhand in this matter. "Psycho-analysis" and "suggestion," the firstfruits of biological psychology, have, so to say, been "captured" by materialistic psychologists and turned against Christian morality. Especially is this the case with psycho-analysis. Up to the present it is the playground for amoral and immoral theories. And yet, as a method, it is *per se* good and exceedingly helpful.

It may be well to explain what I mean by saying that psycho-analysis and suggestion are the firstfruits of biological psychology.

When the recent great war started the medical profession were well prepared for dealing with all kinds of wounds and infectious diseases, and they succeeded well in coping with the enormous amount of surgical and medical work that was thrown upon them. But in another direction they were found quite unprepared. New kinds of nervous diseases, called at first "shell-shock" cases, began to be sent up. The rest-hospitals became clogged. The methods of dealing with these cases were at first merely tentative, and it was a considerable time before they began to be dealt with effectively and successfully. The work provoked thought, and psycho-analysis received an impetus as being the

method that was most successful. Its outlook was frankly biological. The hysteria was an outcome of some experience. The experience was a vital act. The emotional accompaniment had translated itself into an upset of the equilibrium of the organism. The "idea" at the root of the hysteria was treated as a fever would be treated.² It had to be allayed in some way. It had to be localized, isolated, analyzed. The psycho-therapists spoke and thought of "complexes" and "repressions" as a doctor might speak of tumors or catarrhs. Clumsy and inaccurate terminology was used, and a materialistic attitude was adopted. The "censor" repressing experiences was visualized as a canal-man opening or shutting the lock of the canal. The habits and reactions of animals were introduced without qualification or reservation into the field of human psychology. The spirit of the new science and method was impregnated with biology. Psycho-analysis was in fact its offspring. But psycho-analysis, laden though it was with error and false doctrine and bad psychology, had remarkable results and effected startling cures, which showed plainly that there was truth and good psychology in it too.

While psycho-analysis aimed at breaking up the troublesome idea or experience of the mind, that

² *Idea* is here used in the modern sense, not as a *concept* or *intellection* which is the product of *reason and intellect*, but as a general term connoting a cognition which is in part at least imagery and the work of sense faculties.

had translated itself into a disease of the organism, *suggestion* came on the scene to supplement the work. The outlook of suggestion was constructive. Something fresh and healthy had to be planted in the mind. The presence of a sound point of view, of an inspiring, encouraging idea, was found to have a good effect on the organism. Psychical grafting was attempted. The influence of the mind on the body had already been concretely demonstrated by psycho-analysis — dealing, as it had to deal, with the evil effects on health of morbid ideas or distressing emotions. Suggestion, with an equally biological outlook, basing itself on well-known phenomena of hypnotism, now tried its hand at psycho-therapy. Its efforts were also crowned with remarkable successes — and it, too, has come to stay as a method of psycho-therapy. The good effect of a fearless introduction into psychology of biological ideas and methods was demonstrated.

There are many psychological problems which, if ever solved, will probably only be solved by the aid of biology. Psychology must await progress in biology, and advance step by step with it. What, for instance, is sleep? How far is it a phenomenon of psychology? How far of physiology? Is it merely a mental mechanism of suppression, brought about by the unconscious working of the mind and purely psychological? Or is it purely physiological, meaning nothing more than disjunction of nerve terminals at synapses? That we have the psychological

power of suppression cannot be denied. When we drive a thought out of our mind, or crush a rising emotion, we are *consciously* exercising this function of suppression. When in the heat of a game we play on energetically, feeling no pain from the ugly bruise on the shin we have just received, we are *unconsciously* suppressing pain. The chauffeur, suddenly faced by danger, will usually keep cool and dexterously manipulate his machine until the dangerous obstacle has been avoided. In the meantime he has unconsciously suppressed the emotion of fear. Fear would have proved an obstacle to him, it would perhaps have made his hands tremble and lessened his chance of escape. But the power nature gave him of unconsciously suppressing the rising emotion, a power full of deep biological import, saved him. The mechanism of suppression seems also to cast some light on the problem of "forgetting." *How* do we forget and *why* do we forget? Lapses of memory occur in minds that are fresh and young. Fatigue and the failing metabolism of old age do not fully explain "forgetting." What process is at work? By what mechanism does nature at times (though not in the case of Lady Macbeth)

*Pluck from the memory a rooted sorrow,
Raze out the written troubles of the brain?*

The processes of acquiring and retaining knowledge have been well analyzed and have been ex-

perimented upon, but the processes of forgetting are elusive. Introspection hardly helps us at all. It is at times quite startling how we forget — and there is much evidence to show that forgetting is at times purposeful. It is by the mind's own mechanism that experiences are "erased" from memory, or rather driven into the sub-conscious. Painful experiences are at times driven from consciousness and placed beyond recall. And when this happens it is obvious that there is a biological significance in the suppression. To solve this problem it is necessary to have recourse to animal psychology, to find some similar kind of suppression in the conduct of animals, to determine its cause and to examine if a similar cause may not be at work in our forgetting. Sleep, if a purely psychological phenomenon, no doubt also employs the mechanism of suppression. The overwrought, worrying mind is set at rest by "nature's soft nurse." The harassing thoughts are banished from the mind, and only dreams, the shadows and symbolic representations of life's experiences, remain in consciousness. The biological purpose in this mind-repose is plain to all. Were the mind not at rest the rebuilding of the wasted or exhausted protoplasm of the tissues would be impossible.

The psychological aspect of the problem of heredity is also closely interwoven with biology. In some families, taints, mental peculiarities, aptitudes and tastes persist. A tendency towards intemperance,

a strange *wanderlust*, or a special ability for, say, chemistry or architecture revives constantly in the same stock. Whether these hereditary characteristics are atavistic or not, the problem remains. How are they handed on? Some writers maintain that mnemonic modifications in the protoplasm of the nervous matter of the body are physically handed on. We cannot deny the probability of mental phenomena leaving some physical trace in the substance of the brain matter. But how can such substance, or some sufficient part of it, be transmitted in the ovum?

“Elements,” writes N. C. MacNamara,³ “such as those governing the behavior of unicellular beings have separated, or become differentiated, from the rest of the protoplasmic elements, so as to constitute a very important part of the living matter of the nerve cells of more highly organized beings; elements of this description in the course of time have become the instruments whereby energy derived from external and internal sources is transmuted into force, which becomes manifest in purposive or instinctive movements of animals.”

At first sight the existence of such elements seems far-fetched, and the possibility of the transmission of such mnemonic particles incredible. Nevertheless, on consideration, a certain plausibility in this theory must be admitted.

³ *Instinct and Intelligence*, p. 52. We quote this passage with reservations.

The fertilized ovum of the human species has a diameter of about $\frac{1}{20}$ mm., that of an atom may be taken as $\frac{1}{1,000,000}$ mm. Now assuming that about fifty atoms exist in an organic (proteid) molecule, we find that the fertilized ovum starts on its life with about 25,000,000,000,000 organic molecules, of which about 25,000,000,000 are derived from the male element, the head of the spermatozoid, the rest from the female ovum.⁴ If this calculation, vouched for by Professor J. G. McKendrick, is even approximately true, the argument that there are too few organic molecules in the ovum to account for the transmission of hereditary peculiarities hardly holds good. So many million million molecules carrying somehow with them the future complicated structure of the human organism can doubtless also carry with them the mnemonic modifications in nervous protoplasm postulated by the theory of heredity outlined above. There should at least be no difficulty for a scholastic to admit that the instinctive behavior of animals "depends," as Lloyd Morgan says, "upon the inherited structure of their nervous system."

This hypothesis, if true, would throw a new light on the psychology of instinct, passion and habit. It would give a deeper meaning to that "perpetual and intimate influx and interdependence between the psychical and corporeal life,"⁵ which scholastics

⁴ Cf. *Nature*, p. 547, Sept. 26, 1901.

⁵ Cf. Donat, S.J., *Psychologia*, caput i.

never fail to point out, and it would bring into still closer touch psychology and biology.

Perhaps no psychical phenomenon finds so clear an explanation in biology as does the mental mechanism of dissociating experience. It comes to our aid in swiftly adapting ourselves to circumstances and surroundings. We have to live many lives: now at work in an office, now playing tennis, now swimming, now praying, now at the tea-table. In each new sphere of activity we begin to call on a new set of reactions, and to depend on a new body of memorized experience — perhaps even we have to call up a new language. We have the faculty of dissociating memories, reactions, thoughts and words, not suitable to the occasion. Playing tennis, racquet in hand, we instinctively accommodate our muscles to the weight of the racquet, the speed of the ball, etc. The cricket instinct to hit hard and low does not arise. It is cut off and dissociated. In the mental sphere the same power of dissociation is at work. As lawyers, our minds reason on precedents, and not on moral or philosophical principles.

In animal life the same natural power of dissociation is apparent. An amphibian, living now on land, now in water, like the frog, reacts at once in a manner appropriate to its surroundings. Were it, when in the water, to try to escape from danger by jumping it would perish. It must, in the water, react *at once* by swimming and not by jumping.

On land it must escape from danger at once by jumping and not by swimming. The power of "dissociation" is biologically necessary for its welfare—and we in common with animals have this power, though perhaps in a higher degree.

There is hardly a trait of character in us which, to some extent, does not pertain to instinct, and hence it is that we find in animal life so much "behavior" that is kindred to our own. The cow that licks and fondles its newly born calf acts in much the same way as does the young mother with her babe. The strange, dark instinct that urges some men, sick at heart, to go apart from their fellows and die alone, is to be seen in the sick or wounded animal that drags itself away from the herd to die in a ditch or in a wood. The intense absorption of the cat watching its prey is seen in the deep, "absent-minded" contemplations of the poet or the philosopher. The cat, though absorbed, can usually save itself from danger creeping on it unawares, by the exquisite sensitiveness of its sense of hearing. And the poet or philosopher given to absorption develops a sensitive, high-strung nervous system that serves to protect him from mishap. The purposeful laws of biology are common to man and to beast. In the behavior of men under the influence of passion, say of fear, we can see reproduced much of the behavior of animals. And a fertile source of explanation for many unusual phases of human conduct is found in the innate instinct to react in

presence of danger by hiding and remaining motionless or by disguising oneself. Many animals react instinctively in this manner, hoping to escape danger by remaining motionless and passing unnoticed, or by changing their colors to the tints of the surrounding medium. Perhaps it is this instinct to disguise and hide, when frightened, that explains much of the deceitfulness and lying of children.

The perennial problem of dreams belongs also to the province of biological psychology. We shall never understand the significance of our mental mechanism of dreaming, until we have solved the biological problem, why animals dream. The dreams of animals serve some useful purpose. They have some important result, it may be of whetting their reproductive instinct, or of keeping up the tonicity of their muscle tension during sleep. Whatever the answer to the question may be, it will, when found out, throw light on the problem of our dreams.

Biological psychology cannot, of course, dispense with introspection as a method. The importance of introspection is in no way lessened. But there are other methods which help to counteract its limitations and to supplement its deficiencies. "Behaviorist" psychology, built solely on the observation of the external conduct, stands opposed to introspection at the other extreme. No doubt there is a great wealth of psychology manifested in "behavior," and the method of behaviorist psy-

chology has the merit of being objective. Introspection, on the other hand, is always vitiated to some extent by subjectivism. Nevertheless, by it alone the inner working of the mind can be reached and examined, and so it can never be dispensed with. The ideal is then to combine both methods and to look at psychological phenomena from the point of view of biology.

Biological psychology naturally tends towards psycho-therapy. Keeping in mind that the soul is the principle of life, and that its acts are vital acts, it considers psychological phenomena in their relation to the well-being of the body. It might well be compared to moral theology, which considers human acts—that is, the acts controlled by the free-will, in their relationship to the moral law and the ultimate good of the soul. The rational psychology, which was the special preoccupation of the older scholastic psychologists, dealt chiefly with metaphysical questions of the spirituality, simplicity and immortality of the soul, and the freedom of the will. These all-important truths were duly proved and established. But there was further work to be done with a view, for instance, to correct methods of education. The memory, the imagination and the reasoning powers had also to be carefully studied.

Finally, in our day, the practical duty has to be faced of securing the well-being of the body by means of maintaining a proper equilibrium between

the instinctive and controlling forces of the organism. The biology of the mind has to be studied as well as the biology of the body. And the health-giving and health-preserving influence of mental functioning, in other words, the influence of the vital phenomena of the mind on the nervous system, now holds the attention of psychologists. It is of this aspect of the New Psychology that we shall first of all treat.

CHAPTER III

THE SUB-CONSCIOUS

IN ITS broad outlines the modern theory of the sub-conscious or unconscious¹ is interesting, attractive and quite in harmony with our experience of the working of our minds. Further, as we shall see, it is altogether scholastic in its tendency, leading inevitably to the recognition of the spiritual substantiality of the soul.

It tells us that there are processes and activities which go on in the soul without our being aware of them. It points to the existence of influences, from emotional and instinctive sources and from forgotten experiences, that affect our conduct, our feelings and our views, and that remain outside our knowledge or conscious control. It indicates the existence within us of unconscious conation, very like the will, which *resists* certain lines of action and forwards others. Lastly the theory, using the words *repression*, *censor*, *complex*, in a figurative way, describes how some memories are driven down or "repressed," so that they can no longer be recalled

¹ We use these words as synonyms, disregarding oft-made but seldom observed distinctions between the two terms.

to mind at will, how by a process called "censorship," they are kept from reappearing save obscurely and under disguise and how, while thus hidden away, they still may (as "complexes") exercise a harmful influence.

In order to show that this theory *in its broad outlines* (we do not pretend to approve of the many nonsensical details introduced into it by popularizers) is quite in harmony with experience, and scholastic in tendency, it will be necessary to adduce certain facts by way of evidence, first of all, as regards the existence of mental processes of which we are unaware, and which we cannot introspect.

Scholastic psychology has always taught that in the formation of universal ideas the active aspect of the intellect (*intellectus agens*) performs functions antecedent to the coming into consciousness of the idea. Of such mental activity we remain totally unaware.² "Awareness is not co-extensive with the mind," wrote Aquinas.³ Next, let us take what happens in a free choice, say of an apple in preference to an orange. One can, through introspection, follow much of the play of motives, *pro* and *con*, and even pursue the mind up to the brink of the choice-act. But there introspection fails us. We find a blank.

² The Scholastic doctrine of *species* and of *instincts* also clearly presupposes "unconscious" mentation.

³ "*Notitia non totaliter menti coaequatur.*"—Lq. 93. a7. ad. 2.

And, lo! the choice is made. This means that the last act, so to speak, "the reaching out of the will," which is most certainly an activity of the soul, occurs without our seeing it or being aware of it at that point of time. It is only afterwards that we know it has happened. "Reasonably," writes Professor Spearman,⁴ "we may expect that experience will escape introspection altogether, so soon as the conditions become sufficiently unfavorable, and especially when these experiences have very small intensity or duration."

What is called a "*set*" or "*determining tendency*" in experimental researches, a phenomenon well known to students of psychology, illustrates the same points. A subject is told to react, say by pressing a button, as soon as a certain prearranged signal is given. He "accepts" this instruction and *resolves* to do so. He thus adopts a certain "*set*" of mind. With the lapse of time, although the student continues to react in the right way, the resolve or "*set*" becomes less and less conscious. Finally it ceases to be conscious, and yet he continues to react. To say that a "*habit*" is formed does not explain the matter. His will is functioning, but unconsciously. The "*set*" is a mental activity, and continues to be such, and yet he is unaware of it.

Turning now to perceptual processes, we have abundance of evidence that such processes may be unconscious. To quote from Professor Spearman,⁵

⁴ *Op. cit.*, p. 166. ⁵ *Op. cit.*, pp. 167-169.

“The second of the two sensory qualities presented successively for comparison may be confidently judged to be different from the first, although this latter seems at the time to have entirely vanished from consciousness. . . . Still more ineffective, if possible, would be the attempt to become aware of any percepts deriving from the eyes separately before the perception from them jointly; and yet the occurrence of some sort of uniocular vision previous to the binocular seems to have been strongly evidenced. Most surprising of all, perhaps, is the complex system of experiences that may be inferred to antecede even ordinary tactual localizations, although to become aware of them by introspection would appear to be a hopeless enterprise.”

Apart from the evidence already adduced as to the existence of “unconscious processes” in the mind, let us briefly summarize sources of further evidence. “Instinctive” likes and dislikes and impulses; problem-solving and constructive work done in sleep; post-hypnotic suggestion phenomena; intuitions; sudden witticisms, symptomatic acts when asleep or awake; the sending and receiving of telepathic messages; sudden brilliant ideas or inventions; all of these “phenomena” on careful analysis will betray the fact that *there is a working in the depth of the mind, outside our control and unknown to our consciousness*. There is a further mass of evidence adduced from pathology, and from the in-

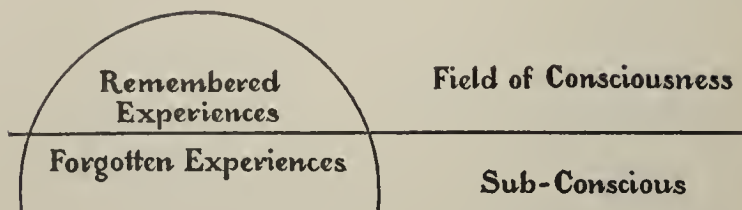
teresting cases of planchette writing described by Morton Prince.⁶

Let us take as the second point of the theory of the sub-conscious, the hypothesis of the "*complex*." Is it in accord with experience? Is it sound, *in its general outline*, from the scholastic point of view?

Let us illustrate the question thus: I find I have an intense dislike for a certain type of animal, say a cat, amounting almost to a phobia. The feeling of dislike is, of course, conscious, and further, I find in my mind some reasons for my dislike, but they do not explain fully its depth and intensity. There seems to me some mystery about it that I cannot fathom. Is the dislike connected with some experience that I cannot remember? It must have some source, and if the source is not to be found in memory, it must lie in some forgotten experience that is still active, though forgotten and unconscious. Such is the line of thought of the new psychologists. They have, however, an alternative explanation which amounts to the same thing as far as concerns the point at issue — the activity of an unconscious experience. They say that the dislike felt for the cat may in reality be a dislike for something else, which is typified by the cat, and unconsciously transferred to the cat.

Now, let us make use of a diagram.

⁶ *The Unconscious* (Macmillan, New York, 1921), by Morton Prince.



Above the horizontal line is depicted the content of consciousness. The curve typifies the dislike and it is figured as originating, or finding its explanation in the forgotten experience or experiences which lie in the sub-conscious. This hidden experience or these "constellated" (grouped) hidden experiences are the "*complex*" which energizes the dislike or phobia.

Now, as regards evidence in favor of this theory, there can be no question that pathology affords convincing illustrations of it.⁷ Early painful experiences, or emotional shocks, though at times completely forgotten, do continue to exercise a disturbing influence on the mind. Catholic ascetic writers too, are continually emphasizing this very matter in different language. Bad acts, long since forgotten, continue in their evil effects to predispose, psychically as well as physically, to the like again. The spirit of worldliness, *a kind of constellation of ideas*

⁷ For instance, the case of the young doctor recounted by Dr. Rivers in his work *Instinct and the Unconscious*. This case will be recorded later on.

and tendencies of a materialistic and cynical nature, is known to "taint" in an obscure, hidden way, all the views, conduct and principles of worldlings. What is this but the "complex" theory in another sphere, the moral sphere?

From what we have said of mental processes, and of the persevering influence of forgotten cognitions, it will be possible to explain the origin of misunderstanding and confusion as regards the word *conscious* (and consequently the words *unconscious* and *sub-conscious*). Mental processes, whether we be aware of them or not, are "experiences." They are lived. *A mental experience, then, is one thing. The consciousness or awareness of it is something other.* "Conscious" properly applies to the second meaning; it signifies "the mind's immediate cognition of its own experiences." But "conscious" has been also used to express the mental experience itself in the New Psychology.

Now, if "conscious" were to be kept to its strict meaning terms such as "the unconscious" and "the sub-conscious" would be without sense. If, however, the word *conscious* be taken in its acquired signification, then there is meaning and sense in the term, "the unconscious," for by it reference is made to those mental processes or active ideas of which the mind is not actually aware.⁸

Professor James defines the soul as "the total

⁸ In the present work very frequently we use the word *conscious* in its acquired sense.

stream of our conscious life." Others have defined it as "the entire collection of our conscious states." Scholastic psychology has always pointed out the incompleteness and falseness of such definitions, which fail to describe the soul as a spiritual substance underlying conscious states. For the moment we wish only to point out that whereas the theory of "unconscious mental processes" is perfectly reconcilable with the scholastic definition of the soul, it is absolutely irreconcilable with those of James and others. Indeed, the theory of the unconscious leads directly to Scholasticism. It is quite wrong, then, to regard our psychology as incompatible with or hostile to this theory. As Father M. Maher, S.J., pointed out,⁹ "Provided it be recognised that no composition, amalgamation, or coalescence of unconscious units can constitute a conscious state, we do not see any conclusive reason for denying the reality of unconscious activities of the human mind. Furthermore, adopting the *Aristotelico-scholastic* theory that the soul is a substantial principle at once the source of vegetative, sentient, and rational life, *this view seems to be forced upon us*. Latent modifications of the mind *must be admitted* at least as dispositions, habits, or *species impressae*, to account for the possibility of recognition and ordinary knowledge."

⁹ *Psychology*, p. 357 (ed. 1915, Longmans, London) (author's italics).

Let us turn now for a moment to the subject of memory. Some memories, "recallable mind stuff," we can evoke at will. They are said to be in the "fore-conscious," for we can, when we like, bring them into "the field of consciousness." Other memories slip from us and get lost. We cannot normally recall them. They have sunk, or been driven down into the sub-conscious. They are "unrecallable mind stuff." Nevertheless, under hypnotism, or during dreams or in planchette writing, they sometimes betray themselves, so that we know they still exist. It is, then, justifiable to say that they are stored up in the sub-conscious.

But in what form are they stored up?

We know that there is a physical basis of memory. The mind utilizes the nervous system most probably in all its activities, and certainly in its lower activities, wherein imagery is prominent. Beyond doubt there result some physical modifications of the neurons. These modifications or mnemonic marks in the neurons of the brain persevere, perhaps throughout life, and afford the physical basis of memory. Morton Prince¹⁰ applies the word *neurograms* to such modified brain neurons, and there is good reason to suppose that remembering consists in the reenergizing, through the soul, of such neurograms. The word *unconscious* has quite wrongly been applied to such "rechargeable brain cells." They cooperate in the unconscious mind processes,

¹⁰ *Op. cit.* (*The Unconscious*).

but of themselves they are nothing more than nerve-stuff. In the course of physiological processes they interact, and there may occur something in the nature of the "co-consciousness" described by Morton Prince, and affirmed by him to be the source of automatic writing. However, the matter is still very obscure, and it is dangerous to dogmatize about it. We may safely, however, affirm that in memory there is a three-fold aspect. Firstly, there is the mark or mnemonic modification in the brain neuron, which is *anatomical*. Secondly, there is vital interaction between neurons, and physical functioning among them, which is *physiological*. Thirdly, there is a voluntary or involuntary reenergizing of the neurons by the soul, which results in memories and images, that grow more or less conscious, which is *psychological*. The three aspects, taken together, give evidence of the intimate relationship and interaction, between soul and body.

In order to illustrate in more detail how the theory of the sub-conscious is quite in keeping with the results of introspective experiences, and to confirm our thesis that it is quite in harmony with the spirit of Catholic psychology, we shall now turn to the writings of St. Augustine,¹¹ whose acute mind was preoccupied with the inner workings of the soul. We shall find further that he anticipated many of the "discoveries" of the New Psychology.

¹¹ *Confessions of St. Augustine* (Longmans, Green; edit. 1897), Bk. X, Ch. VIII. seg. (author's italics).

“And *I enter the broad fields and vast palaces of my memory* where there are the treasures of countless impressions imported into it from all sorts of sensible objects. *There is laid up every reflection we make*, every enlargement, diminution or variation of those things which the senses have attained to, and which oblivion hath not absorbed and buried. When I am there I ask what I will to be produced, and some things instantly present themselves; *others are long in coming and have to be drawn out as it were from more secret recesses*; some rush forward in crowds, and while one thing is sought and inquired for, they spring into the midst as if saying, ‘Perhaps you want me?’ And *I brush them with the hand of my heart from the face of my memory*, until what I want comes forth to view and stands out cloudless from its hiding place. Other things *are suggested easily and in unbroken order*, as they are sought — those which come first *yielding to those which follow*, and having thus given place, retire again to come when I shall wish. And all this takes place when I relate a thing from memory.”

In this very vivid description of the normal process of memory St. Augustine touches on many of those mysterious aspects of the mind’s workings that modern psychologists inquire into. There is first “the storing up” of memories. How and where are they stored? Is it in the form of those “neurograms” to which I have referred? Then there is an “unwillingness” on the part of some memories to

come forward. What is the meaning of this "resistance?" What are the "more secret recesses?" Have the memories, to borrow a modern phrase, been "repressed and driven down" into regions less attainable to consciousness — from which they must be drawn up by a special method — "*others are longer in coming and have to be drawn out, as it were, from more secret recesses.*" Then St. Augustine refers to the brushing away of unwanted memories and the selecting of the wanted ones. These are mind processes that function without our deliberate direction. In all the comings and goings of the memories there is an obvious dynamism. The memories are not like the dead pages of a book that are turned over one after another, but "*they spring into the midst as if saying, 'Perhaps you want me?'*" and "those which come first yield to those which follow." By what mental process is this order maintained? It is not a process of which one is aware or conscious. It is an unconscious process — a hidden activity of the mind. In fine, in St. Augustine's *description* we see clearly that memory implies mental work, bringing things up, driving things back, selecting, searching, etc. And the greater part of this mental work is not only indeliberate, but unconscious.

Elsewhere St. Augustine emphasizes *the presence in the memory of things forgotten* — "for there (within the vast hall of my memory) heaven and earth and sea are present to me, with all things which

I could think upon therein, *besides what I have forgotten.*" Again — "but what if the *memory itself lose anything*, which is what takes place when we forget and try to recollect? *Where indeed do we search but in the memory itself?* And there perhaps if one thing instead of another presents itself, we reject it, until the one we are seeking occurs; and then we say, 'this is it'; which we should not say unless we recognized it, nor recognize it unless we remembered it. *Certainly therefore we had forgotten it.*" Thus memories are retained though lost to consciousness. In modern phraseology they persevere in the "unconscious." In the mind too are the liberal sciences "in a sort of inner place which is not yet a place," "the images — are laid up as it were in wonderful cells." Again of certain truths he writes, "They were already in my memory but in so remote and retired a part, as it were, in its more hidden caverns, *that unless they had been elicited by the suggestion of another* I might possibly have never thought of them."

It is interesting to see how St. Augustine anticipated the viewpoint of modern descriptive psychology and the methods of drawing or digging out memories from the unconscious by suggestion and association tests. He knows too that his language is figurative and metaphorical, but he has no option but to describe things as he does; now the memory is for him "a vast hall," "a treasure house," now "the very belly of the mind." "It is ridiculous," he

says, "to make such comparisons, yet these things are not wholly unlike." Perhaps we should learn from these words the lesson of not being too severe on the metaphorical descriptions employed by modern psychologists.

One of the theories, as we have seen, of the New Psychology is that there is a kind of "unconscious will," a control-process which functions without our being aware of it. This control-process has been called "the censor" by Freudians; we shall refer to it later on. Curiously enough, St. Augustine seems to have held a similar theory, to which he refers in writing about dreams. Even though asleep, we can make a resistance, or give a kind of consent, "very like reality." "There live in my memory the images of such things as my habits have fixed there; and these rise up before me, lacking indeed their old power when I am awake; but in sleep they present themselves *not only so far as to call forth pleasure but also consent, and very like reality.*" "Where, then, is the reason which resists such suggestions when I am awake? Is it, then, closed with the eyes? Is it lulled to sleep, with the senses of the body? *But how is it, then, in sleep we often resist, and mindful of our resolution, give no assent to such allurements?*" St. Augustine was evidently pre-occupied with these unconscious mental processes. He prays that he may not be led "*even unconsciously*" "*into consenting to an evil thought.*" He marvels at what modern psychologists would

describe as phases of double personality. "*Am I not at that time myself*, O Lord, my God! And how great a difference is there between myself and myself, in the moment when I pass from waking to sleeping, or return from sleeping to waking." One may easily, of course, read too much into what St. Augustine writes, but it is hard at the same time to deny that he was a keen and interested observer into these very phenomena, concerning the unconscious activities of the mind, which preoccupy modern psychologists, and that he tried "to explore the most sacred depths of the unconscious" and, as M. Bergson wrote, "to labor in what is called the sub-soil of consciousness."

St. Bernard, in his "*Traité de la Conscience*,"¹² speaks in much the same terms as St. Augustine of the mind, emphasizing the dynamism and processes of its sub-conscious elements, forestalling modern psychologists in his word descriptions.

"Human consciousness is a profound abyss. Just as it is impossible to draw off the water of a great gulf it is impossible to empty the heart of man of all his thoughts. Human consciousness is a great spacious sea, wherein are found numberless reptiles. Yes, reptiles truly so-called! And as reptiles they crawl secretly to this side and that, moving in an intricately sinuous way. In like manner thoughts enter consciousness, and escape from it, in such wise that we know not whence they come or whither

¹² Ch. I.

they are going. Truly the heart of man is perverse and baffling, and who can fathom its depths? "

Here and there in the writings of St. Francis de Sales, St. Teresa, St. John of the Cross, St. Vincent de Paul and other great Catholic ascetics we find similar allusions to the strange, mysterious, sub-conscious activities of the mind. Bossuet gives a celebrated description¹³ of the working of a "sub-conscious" purpose or "set" and indicates the value and importance of the fruits of sub-conscious thinking. "The thoughts that we are clearly conscious of, are not always our best thoughts. What surges up spontaneously in the depths of the soul, almost without one's noticing it, is what is truest and most personal. Thoughts, deliberately and, as it were, forcibly evoked, are little else than 'imagination,' or mental words picked out of memory as out of a book. What must one do to give birth to the thoughts which spring out of the depths? . . . What I mean when I speak of 'surging up from the depths of the soul, as it were spontaneously' is this: such thoughts are the product of motives that are fully one's own, and completely possessed by the fact that they pass and repass often in the spirit . . . they come up of themselves, without need of reflection or express attention. They are the good thoughts, the thoughts of the heart itself."

In this passage Bossuet seems to teach that our most valuable thoughts are those which arise as a result of the intimate sub-conscious working of the

¹³ *Lettre à Mme. d'Albert de Luynes*, Sept. 30, 1691.

mind on the high motives and principles which we make our own by constant reflection. Let us add one more quotation ¹⁴ from a celebrated spiritual writer, emphasizing once more the sub-conscious processes of the mind:

“ This spring (the sub-conscious) surges, and is stirred within me, without my knowing it. Its impulses become mine. They are instincts, desires, not perceived ideas or deliberate wishes. But this source of instinct (obscure, involuntary, indefinite, rich, potent) is for me a reservoir of riches, and of energy, a resting-place, an eating house that God has placed within me, without my cooperation. I know not whence come my desires or my inquietudes. . . . I am not responsible for them, and it is always difficult for me, and often impossible to change them.”

It would be possible to give many other quotations and references to show how clearly the great Catholic ascetics and philosophers appreciated the phenomena of those depths of the soul that modern writers call the unconscious. Catholic writers, as we have said, were not preoccupied about scientifically defining the scope, modes of action or effects of sub-conscious mental processes, but they did not ignore their existence. In many ways they anticipated the “ discoveries ” of the moderns, while avoiding the mistakes and extravagances into which the latter have fallen.

¹⁴ Père Gratry, “ *La connaissance de l'âme*, ” 1, 14.

It is wrong, then, to regard the Catholic psychology as either ignorant of or hostile to the theory that there are "unconscious activities of the mind."

To sum up, it seems in accord with experience, with scholastic theory, and with Catholic asceticism, to admit the existence of mind processes, both conceptual and perpetual, which occur without our being aware of their occurrence. Further it seems reasonable to admit that some forgotten experiences continue to exercise an influence upon our views, feelings, and conduct, and upon our mental processes. Some of these forgotten experiences, called in this case, "complexes," seem to exercise a baneful influence upon the workings of the mind, and to originate mental troubles or psycho-neuroses. In fine, it would seem that in broad outline the modern theory of the unconscious is perfectly acceptable.

Bergson, a few years ago, ventured upon the following prophecy: "To explore the most sacred depths of the unconscious, to labor in what I have just called the sub-soil of consciousness; that will be the principal task of psychology in the century which is opening." This anticipation is likely to prove correct, and it should be a source of joy to Catholics and scholastics, for the study of sub-conscious mental processes must lead honest investigators to recognize the spirituality and substantiality of the soul, which such processes necessarily postulate.

CHAPTER IV

NERVE TROUBLES AND MIND DISEASES

THE New Psychology, as we have seen, approached the problems of the mind through biology. It found that normal mental functioning was biological and healthful, while abnormal functioning was anti-biological and unhealthful. It set itself, then, to study abnormalities and pathological states with the practical purpose of reestablishing health. Modern psychotherapy, or mind-healing was the result, and it occupies a large portion of the field of the New Psychology.

When we come to study nerve troubles and mind diseases we are met at once with a difficulty. The symptoms are both psychical and physical. Is the root-cause psychical or physical? Does it lie in disorder of mental functioning or in disease of the nerve tissue? In some cases, when surgery has discovered tumors, lesions or disintegrations of nerve tissue, the cause is obviously organic. In other cases the cause seems equally clearly to be psychical or functional, when every effort to find physical injury or decay has failed, and where the mind disease is concomitant with a perfectly

healthy physical state. But it is in the mixed cases that the problem of determining the causal factor assumes its greatest difficulty. In mixed cases, as for instance, in "exhaustion neurosis," there are both psychical and physical symptoms, and there seem to be both functional and organic causes at work. To which source is the abnormal state to be primarily attributed? Neurologists of the older and more materialistic school give one answer; those of the newer, psychical school give another.

The classification of nerve diseases has presented very great difficulties, partly on account of a different philosophical outlook of neurologists, and partly on account of the complexity and the overlapping of symptoms.

Many efforts were made, resulting finally in that of Freud, which in modified forms holds the field. Freud divides nerve diseases into "*true or actual neuroses*," comprising anxiety-neurosis and neurasthenia proper, etc., and "*psycho-neuroses*," comprising hysterias, obsessions, etc. The former have more pronounced somatic symptoms, and are due, to a great extent, to organic causes. The latter, though also accompanied by bodily symptoms, are due to psychical causes. This classification we accept as a working hypothesis, except that with Dr. Stoddart¹ we place neurasthenia among the psycho-neuroses.

In this work we do not intend to deal with such

¹ *The Mind and its Disorders*, by W. H. B. Stoddart (Lewis, London 1921).

forms of mental disease as paresia, or dementia paralytica, where there is obviously lesion or disintegration of nerve tissue. Such diseases are outside the scope of psycho-therapy strictly so-called. As we purpose to keep closely to those forms of mind disease which are certainly curable by psychological methods we omit also the "*true or actual neuroses*" and confine ourselves to the psycho-neuroses just now referred to — *hysteria*, *obsession* and *neurasthenia*. Under *obsession* comes the very common disease which afflicts religious people, *scruples*.

There are certain general characteristics, which mark one suffering from a psycho-neurosis, apart from the particular symptoms which belong to his special disease. He is usually "*out of touch*" with *things*, and secondly *he suffers from depression*. The state of depression may be intermittent, but the "out of touch" state is constant. He is hardly ever quite natural, quite at his ease, in a normal way. He is unreliable, inconstant. Want of balance, excitability, and tenseness are nearly always there, whether he be obsessed, neurasthenic or hysterical. He is self-centered, introspective and usually "intro-vert" in type. He is on the whole difficult to deal with, and difficult to help. Health may be good or bad; it varies, but his interest in things is either altogether excessive and emotional, or it wanes to nothing, and a listless indifference comes over him. He exemplifies to a greater or

less extent theories of double-personality and split-consciousness. When his fit is on him he is altogether strange to his true self. When he is better again, he has receded quite a distance from where he stood. He goes to extremes suddenly. With him, "a little more than little is by much too much." Lastly he is very helpless, for while unable to help himself, he will not allow others to help or guide him. *He resists cure*, thereby constituting, as we shall see, the great central difficulty of psychotherapy.

Let us return now to discuss, in a general way, some of the special symptoms of the psycho-neuroses. Strange to say, many of these symptoms are very familiar to us, living, though we be, among normal folk. There are, as it were, little bits of madness sprinkled about. Grains have fallen on all of us. None of us is perfectly sane and normal. We are all eccentric in some way or other, hence it is that the saying arose, "All men are mad." The *mens sana* is harder to find than the *corpus sanum*. And indeed, to go farther, the line which divides the normal from the abnormal is a very thin line.

First, let us take some common symptoms which belong properly to the psycho-neurosis, *obsession*.² Under *obsession* come irresistible impulses and fears (phobias) and tenaciously harassing thoughts, and memories.

² Obsession will be dealt with more fully later on.

Some people, as they go along a street, keep hitting each lamp-post as they pass, or touching things, and they feel quite uncomfortable if they miss one (*folie de toucher*). Or, as they walk, they feel an urge or impulse to step on every second or third flagstone or crevice. If near a fire they must be poking it, and making it burn up (pyromania). Others cannot carry on a conversation without frequent repetition of a pet word or phrase (onomatomania). Others will ever be humming an air, or whistling a tune; others repeating a question just put to them or imitating a gesture or movement they have just noticed (echo-lalia). Others must have something to collect — stamps, curios, books, pins, odds and ends; “stealing” them in a conventional or unconventional manner (kleptomania). Then, as regards fears, how numerous they are! One fears mice; another the spilling of salt; another a falling picture; another high-places (acrophobia); another narrow or confined spaces (claustrophobia); another the color red, (erythrophobia); to others as in Shakespeare’s *Merchant of Venice*, even bag-pipes cause “a lodged hate and certain loathing.”

*Some men there are love not a gaping pig;
Some, that are mad if they behold a cat;
Some when they hear a bag-pipe.*

Worrying thoughts, anxieties and memories afflict so many that there is no need to refer to them, nor to those “insoluble doubts” about the most trivial

things (*folie de doute*) which cause some people to spend hours deciding whether or not they will go to the theatre, or wear a blue rather than a grey tie.

Perhaps the form of psycho-neurosis which is most nearly approached by people who remain sane and normal is paranoia — literally “thinking beside the mark.” It is a hysteria of delusions. It includes the “persecution” obsession and “love” obsession. The paranoiac sees in one man an enemy who “has it in for him” and who is plotting against him. In another he sees a great and true friend who loves him. In himself he often sees a gifted, blameless, though unappreciated hero. He lives in a dreamland, his actions being of great worth, himself of great importance. He is out of touch with reality. He cannot face reality or adjust himself to actualities and conditions of life, and so, flying from the hard, chill edge of fact, he retires into the world of his fancy, and there finds compensation for his weakness and inferiority in his delusions and his dreams. And in his hallucination he lives content, unless his enmity against his supposed persecutor develops into a homicidal tendency and brings trouble upon him.

The tendency of the paranoiac is to be seen in multitudes of people who live happily in the delusion that they are useful or important, whereas in reality they have fled from the battle of life. The paranoiac tendency raises also the problem of the origin and nature of the emotional force that drives people to

form and believe in such delusions, and it raises the biological problem of the protective significance of such delusions.

Coughing, "clearing the throat," stammering, nervous "sweating" at every unexpected occurrence, excessive shyness and blushing, together with fainting and some other types of fits, are all likewise forms of obsessional psycho-neurosis. In connection with hysteria we find likewise many familiar symptoms. As we shall see later on, the characteristic of this psycho-neurosis is "the splitting of consciousness," or to express it in a better known way "double-personality." Somnambulism is a common symptom of hysteria. Absent-mindedness is another common symptom. The most remarkable form is what the French called "*fugue*."³ It often happened during the war that a soldier would desert and make his way back to a place of safety, while quite unconscious of the fact that he was deserting. He would speak and act normally and intelligently. In buying railway-tickets, making purchases or inquiries, conversing with friends, he would betray no symptom of abnormality. In a sense he would be consciously deliberate in his actions, and perfectly sane. And yet, subsequently, he would have no memory whatever of what he had been doing.

The "*globus hystericus*" felt sometimes in swallowing, temporary loss of voice in emotional states, temporary paralysis of limbs or organs, excessive

³ This is perhaps a form of *wanderlust* or *dromomania*.

weeping, uncontrolled laughter, are also well-known symptoms of hysteria.⁴

Neurasthenia is so well known that it is hardly necessary here to call attention to its symptoms. The physical and psychical sense of fatigue is almost always present. General "*malaise*," irritability of various kinds, depression and inability to control attention (distractibility) are also common features.

Let us turn, now, to consider briefly the various theories as regards the causes of the psycho-neuroses. Later on we shall examine these theories more in detail. Freud, as might be expected, teaches that the cause of both neuroses and psycho-neuroses is to be found in sex-trouble. "We recognize," he writes, "in the *true neuroses* the somatic (bodily) effect of disturbances in the sexual metabolism, while in the *psycho-neuroses*, we recognize the psychic effects of the same disturbance. Kempf sees in both kinds of neuroses, "eccentric biological deviations produced by organic diseases." Some writers see in the psycho-neuroses the bad dreams and nightmares of waking life. When asleep the sub-conscious manufactures dreams; when awake it manufactures the psycho-neuroses. Janet, and with him Père Eymieu, S.J., regard the psycho-neuroses as the results of disordered mental functioning, due to the exhaustion of nervous energy. When the tension of our energy falls below par, the troubles appear. Alfred Adler sees in "organ inferiority" the

⁴ Subsequently we shall treat hysteria fully.

source of almost all mental trouble. Dr. Vittoz of Lausanne sees in the psycho-neuroses the results of loss of "cerebral control." The will can no longer restrain sub-conscious ideas and impulses from breaking into conscious life and upsetting normal mentation. McDougall finds in *amnesia* (loss of memory) in its broad biological sense the source of mental trouble.⁵

"It seems probable that underlying every neurosis is some amnesia; it may be the forgetting of the use of one or more limbs or of the sensitivity of some region of the body or of the movements of articulation or phonation, or of some large tract of experience or the forgetting of all particular facts—and in extreme cases, which are generally described as cases of regression, the amnesia may involve the patient's whole stock of acquired skill and knowledge so that he is temporarily reduced to an infantile state both in bodily and mental respects."

In general, the theory of the New Psychology, as regards the causes of the psycho-neuroses, is summed up by saying, "an *idea*⁶ becomes a disease." The idea may be the result of an emotional shock of some kind or other, perhaps dating back many years. It is the *complex* of which we have spoken in a previous chapter. It has behind it a reservoir of emotional and instinctive force. It has perhaps, been

⁵ *Functional Nerve Diseases*, ed. by H. Crichton Miller, p. 187 (Hodder & Stroughton, London, 1920).

⁶ The word is used here in its broadest sense.

dormant and forgotten in the sub-conscious for a considerable time. Something now happens which brings it into play and "a sum of emotion is transformed into a physical disturbance." A hysterical paralysis of the facial nerves has been known to result from a contemptuous slap on the face. Here, some deep instinctive force was let loose on the occasion of the awakening of the idea suggested by the insult and the psycho-neurosis resulted.

This theory will, however, become plainer in the course of our exposition of Dr. W. H. R. Rivers' biological explanation of the psycho-neuroses.

Dr. Rivers sets out to show how instinctive tendencies, when no longer held in check by controlling forces, upset the psychic equilibrium and result in psychoses. "The psycho-neuroses in general are failures in the maintenance of this equilibrium. When such a failure occurs, certain processes, some instinctive, some of the order of intelligence, come into activity as attempts to redress the balance."⁷ The upset of the equilibrium is produced in one of two ways: by increase in the power of the suppressed instinctive tendencies, or by weakening of the process by which they are controlled. Thus the frequency of nervous disorders about the time of puberty may be ascribed to the increased power of tendencies connected with the sex instinct. The frequency of war neuroses was due to the stimulation

⁷ *Instinct and the Unconscious* (Cambridge Univ. Press, 1922), p. 119.

of the danger instinct, and the awakening of strong emotions connected therewith. On the other hand controlling forces are weakened by shock, strain or fatigue, as they were frequently during the war, and so the balance was often upset in the second way.

Naturally the special form of the neurosis is dependent on the nature of the instinctive tendency that breaks free. The neuroses of the war were due to the escape of self-preservation tendencies. Now, nature is not without resource in dealing with neuroses, and sometimes the organism succeeds in regaining control of the revolting instinctive tendencies. This is done by the unconscious mechanism of suppression. This instinctive power of suppressing emotional tendencies is shown clearly in the type of animal reaction to danger — namely, reaction by immobility. The frightened animal has an impulse to fly, but such tendencies are suppressed instinctively, as any movement which would make the animal stir would betray its presence. In normal sleep, too, the mechanism of suppression manifests itself. Worrying thoughts and desires are allayed by “nature’s soft nurse,” and driven into the subconscious. Anger, sorrow, hate subside naturally with time, thanks to this mechanism of suppression, were it not for which we should, no doubt, more frequently become victims of neuroses. It is a psychic mechanism of deep biological import.

Sometimes, however, when the equilibrium between instinctive tendencies and controlling forces

is upset, and when unconscious suppression fails to allay the conflict, and we find ourselves under strong neurotic tendencies, we strive consciously and wittingly to allay them. This method, according to Dr. Rivers, usually fails, and leads to some form of anxiety neurosis. A general state of malaise and discomfort is reached which may soon pass into definite depression. The discomfort and depression crystallize around some painful experience, and take some distressing form. Hence, as Dr. Rivers writes, "anxiety or repression neuroses may be regarded as unavailing attempts to solve a conflict by using, in an effective manner, a process which is only efficacious when it is exerted instinctively."⁸

The conflict between instinctive tendencies and controlling forces finds another possible mode of solution and that by converting the energy engendered in a physical manifestation, a paralysis, contracture or anaesthesia⁹ of some kind. In other words, a hysteria supervenes, and peace of mind, at the expense, however, of the paralysis or anaesthesia, is restored—the conflict is over. This is called a "conversion neurosis" by Freud, and a "substitution neurosis" by Rivers.

During the war such paralyses and anaesthesias, including aphasias,¹⁰ deafness, mutism, etc., frequently resulted from shock or strain, and had, of

⁸ *Instinct and the Unconscious*, p. 126.

⁹ Loss or diminution of feeling.

¹⁰ Loss of power of speech.

course, the inevitable result of unfitting the subject for further service in the field. They served, therefore, to protect the patient from further dangers, and came to be looked upon as distinctive though abnormal reactions to danger. At first sight this seems to be very far-fetched, but as a theory there is much to be said for it. Dr. Rivers interpreted these states as attempted reactions to danger by immobility. In each case there is the element of suppression; by mutism the impulse to cry out is suppressed, by paralysis the impulse to fly is suppressed. "The paralysis and anaesthesia of hysteria are modifications of one of the most definite of the various instinctive processes by which animals react to danger."¹¹ This type of instinctive reaction is less improbable in a soldier, for the reason that soldiers are by training very suggestible. Drill and military discipline aim at producing in soldiers a state of mind which is responsive to the least sign of command, and which adapts the soldier to live and act in perfect harmony and unison with those of his company or regiment. Such a life resembles in its dependence on suggestibility the life of a herd or flock. The predominance of suggestibility means the abrogation of the more intelligent forms of reaction, and reduces the soldier to a state more dependent on instinctive tendencies, amongst which are social or herd tendencies.

"If a group of animals (writes Dr. Rivers¹²) is

¹¹ *Ibid.*, p. 131.

¹² *Ibid.*, p. 133.

to adopt successfully the instinct of immobility, it is not only essential that all tendencies to the movements shall be suppressed; it is just as essential that every one of its members shall suppress the warning cry which serves so useful a purpose on other occasions. If, therefore, hysteria is primarily a variant of the instinct of immobility, it is natural that one of its earliest, if not its earliest need should be the suppression of the cry or other sound which tends to occur in response to danger. I suggest, therefore, that the mutism of war hysteria is primarily connected with the collective aspect of the instinct of immobility. When it persists, as it often does, after removal from immediate danger, this is because it provides a means of protection from further participation in danger, and is therefore utilized, not consciously, but in that unwitting manner which is characteristic of instinctive forms of behavior."

We have dwelt somewhat at length on Dr. Rivers' theory of the psycho-neuroses, because it indicates the lines on which a true explanation should be worked out. It emphasizes the biological significance of the neuroses and suggests a new viewpoint. It shows how instinct plays a part in determining the form of the neurosis. Picture a healthy soldier, sound in every respect, mentally and physically, but for the moment terrified at the proximity of bursting shells. He is ready to cry out for very fear, but his military training and his sense of shame prevent him. Suddenly a shell bursts very close to him. He

is knocked down and covered with mud, but unwounded and organically uninjured. When he is lifted up, or when he pulls himself together and gets up, he finds he has lost the power of speech; he is suffering from hysterical mutism.

Here we have a characteristic substitution neurosis. There was a strong emotion of fear. This emotion has now passed away, but in its place there is mutism. There was an instinct to cry out. This instinct was at first wittingly repressed. Now the very power to speak is suppressed. What is the connection between these facts? What mechanism of the mind, of the whole organism, mind and body combined, brought about the change? And, if we are to believe the mental specialists of the "rest hospitals" at home, such cases of mutism often endure until the likelihood of returning to the danger zone is over. The hysteria was thus retained, as it seemed, instinctively, as a protection against further danger.¹³

It may be well to say a few words, before concluding, of the possible explanation of the compulsion neuroses and phobias to which we referred earlier in this chapter. In one sense "compulsions" and "phobias" are the result of dissociation of consciousness, and according to the view that emphasizes this fact ¹⁴ "intolerable cravings dominate the

¹³ This state is called "traumatic hysteria," to be referred to later on.

¹⁴ *Psycho-Analysis*, by André Tridon, p. 164.

individual's behavior, despite the ego's struggle to prevent it, causing obsessions, phobias, compulsions, mannerisms, hallucinations, delusions, etc., and obtain gratification in the same manner as the intra-gastric itching of the stomach, hunger, causes thoughts and hallucinations, during sleep or privations, about getting and eating food." But whence do the intolerable cravings come? How do they succeed in dominating behavior? What gives them their force? Let us suppose that "compulsions" and "phobias" are symbolic of some elemental acts or repulsions which are instinctive; for instance, the effort to breathe, or a shrinking from excessive heat. If in early life a child should have had a desperate struggle to fill its lungs, and if the struggle was accompanied, as it doubtless would have been, by the emotion of fear, we can imagine that subsequently any slight transitory difficulty in breathing would awaken the once-felt emotion of terror. The consciousness of danger in connection with breathing might lead instinctively to steps to avoid any choking sensations, and give rise to the rather common compulsion of clearing the throat. Such a habit would have so deep a significance and such a strong emotional background that it would be impossible to shake it off. It would form a veritable "compulsion neurosis." In the other case I referred to, if in early life a child had to shrink with pain and fear from a fire, the emotion awakened on that occasion might be rearoused subsequently, not only

by fire, but even something which, in its mind, would symbolize a fire, perhaps, for instance, the color red. Redness might thus become a phobia for him. And it is unquestionable that compulsions and phobias are largely symbolical.

One thing, however, we may remark, and it too is of biological significance, in connection with "phobias" and "compulsions," that apart from the inconvenience caused by the occasional occurrence of the "phobia" or "compulsion," the subject has peace of mind. He has escaped from something worse. He has attached the engendered emotion, whatever it is, to some definite object or act, and now finds the solution for his disturbed equilibrium in a compromise. He pays blackmail, but unless the payments are too heavy or too frequent he is, on the whole, well off. "One of my patients," writes Dr. Rivers,¹⁵ "had a compulsion to cut himself, which was satisfied as soon as he had drawn blood. This compulsion followed definite thoughts of, and impulses to suicide, following the suicide of his company commander, and cutting himself was a kind of symbolic act which gave relief."

¹⁵ *Instinct and the Unconscious*, p. 141.

CHAPTER V

HYSTERIA

WE propose to treat of the psycho-neuroses under the headings Hysteria, Obsession, and Neurasthenia, adding a special chapter on Scruples, as an important form of obsession. These states are called "borderland" states, lying as they do between sanity and insanity. Under each of these classes many sub-divisions have been found, and a class of episodic states (exaltation, depression, delusions, somnambulism, fixed ideas, delirium, choreiform movements, etc.) is sometimes placed apart. Under Hysteria we find such sub-titles as Conversion Hysteria, Hysterical Psychoses, Anxiety Hysteria, Fixation Hysteria, designed to satisfy the particular viewpoint of the neurologist.

Hysteria, obsession and neurasthenia are the chief types of psycho-neuroses, of mental disorders which spring from mental causes as distinguished from organic causes. They are "the functional nerve diseases" proper, and although, as might be expected, they show bodily as well as mental symptoms, their treatment must be designed primarily from a psychical point of view, rather than from a physical or physiological point of view. These dis-

eases are looked upon by lay folk as "diseases of the imagination," and common-sense people are inclined to be impatient of them, or to laugh at them. The unfortunate sufferer who has hysterical attacks, or obsessing fears, or neurasthenic "fatigue" is looked upon as foolish, or is treated as a kind of malingerer. To some extent the person affected with obsessing scruples is likewise misjudged. He is regarded as one who is more or less responsible for his own self-torture. And yet, these mental diseases or ailments are very real, and according to the theories I am discussing, the patients, in each of these cases, deserve the same amount of sympathy, if not more, as those suffering from rheumatism or cancer. They are unable to help themselves. They need treatment. Their diseases, though diseases of the mind, or if you will, "of the imagination," are often deeply rooted and very difficult to heal.

The popular mind has a fairly correct idea of the nature of hysteria and recognizes it implicitly as a psycho-neurosis. But, on the one hand, it gives a too broad interpretation to the term, and on the other hand it is unaware of the great variety of hysterical symptoms, and of the strange forms hysteria may take. As Maurice Craig writes,¹ "Hysteria, so far as the public mind is concerned, has practically become a popular term which includes all divers disorders, physical or mental, which are too obscure to be otherwise explained." Never-

¹ *Psychology of Medicine*, p. 277.

theless it is a very definite and interesting form of psycho-neurosis, and on account of its frequency and importance, it merits to be treated at some length.

The word hysteria (*ὑστέρα* — the womb) was originally applied to the nervous crises occurring exclusively in women, but in modern times it is applied to mental diseases of either sex, where there are psychical symptoms of a certain kind, without organic lesions. Its pathogenesis remains a mystery, but it is now fully admitted that it is of psychical origin, although its manifestations and predisposing factors may be partly physical. "Everyone," writes E. Prideaux,² "is now agreed that it is a condition of the mind, and that the symptoms are of psycho-genetic origin"; and the same writer defines hysteria in general as "a mental state manifesting itself by physical symptoms which can be removed by psycho-therapy."

It may be well to summarize briefly the *mental* and *physical* symptoms of hysteria.³ Among the mental symptoms we find capriciousness, rapid change of moods, unreasoned likes and dislikes, emotional exaltation or depression, irritability, unreliability of judgment, and a pronounced *craving for sympathy*. We find, too, excessive emotional reactions, uncontrolled laughter or weeping, and often laughter or weeping at wrong times. The

² *Functional Nerve Disease*, ch. 4, p. 42.

³ Cf. *Diseases of the Nervous System*, by H. Campbell Thompson, p. 497.

hysteric is introspective and self-centered (introvert in type). He loves to discuss his symptoms; he clings to them, and resists treatment in a strange way, both consciously and unconsciously. He suffers from sudden lapses of memory (amnesia), he experiences mind-blanks; at times he acts as though "not himself" — he has what he calls his "mad moments."

The physical symptoms affect both the motor and sensory systems. There is what is called *over-action* of the motor system which betrays itself in tremors, spasms, convulsions and contractures, which may be very slight or very severe; and *under-action* which may appear as paralysis, partial or general. Over-action of the sensory system shows itself in excessive sensitiveness to sense-stimuli of pressure, heat, cold, etc., and under-action of the sensory system by anaesthesia or insensibility to physical stimuli. Sometimes the special senses are affected, and there is hysterical blindness or deafness, etc. Subjective pains of various kinds are felt; rheumatism-like pains in the head or neck, pains in swallowing (*globus hystericus*), heart-pains and palpitations, and vague discomforts connected with the digestive organs. "Hysteria," writes Stoddart,⁴ "sometimes makes its appearance in the form of more or less rhythmical spasms, the affected part of the body varying in different patients. We meet with jumping arms and legs, blinking eyebrows,

⁴ *Mind and its Disorders*, p. 239.

salaams, hurried respirations, cough, hiccough, sniffs, grunts, barks and other strange noises, difficult of description. Such movements are commonly called '*tics*.'” Hysterical symptoms occur in epidemical forms, not unfrequently in schools; contagious laughing, sneezing, yawning, vomiting, or even fainting may be regarded as minor instances in point. The “dancing-mania” of the Middle Ages, which spread rapidly throughout wide areas of Europe; the strange revivalist movements of Wales and the United States, and perhaps some war-fevers that seize nations at times, seem to partake of epidemic hysteria. No doubt when the psychology of peoples is fully studied, it will be found that there are pathological phenomena, somewhat resembling the psycho-neuroses of individuals, to be taken into account.

Although the symptoms of hysteria are numerous and sufficiently clearly marked, it is not always easy to diagnose the disease. Organic nerve trouble often betrays itself, in its beginnings, by such symptoms, physical and mental, as I have enumerated. And it is often difficult at first to determine for certain whether or not some lesion is present. One helpful method of resolving such doubts is by the study of muscular reflexes, the “knee-jerk,” the “plantar-reflex,” and “ancl-clonus.” The “knee-jerk” test is easily accomplished. The patient sits with legs crossed. A sharp cut with the side of the hand, just under the knee, will cause the jerk.

The presence of an exaggerated "knee-jerk" should be noticed in hysteria; its absence usually negatives hysteria. A typical "extensor" response of the plantar-reflex similarly negatives hysteria, but it is not necessary here to enter further into methods of diagnosis.

It is now time to discuss the various theories as to the nature of hysteria. These theories are so helpful in understanding the origin and mechanism of psycho-neuroses in general that we shall go into them fairly fully. There are four theories worthy of mention, those of Janet (and Père Eymieu, S.J.), Babinski, Déjérine, and Freud.

For Janet the salient characteristic of the hysterical person is his apparent double personality. His true self seems at times to be suppressed, and another self seems to take its place. He somehow splits off or dissociates part of his experience, part of his temperament and character, and allows another unknown, unfamiliar part to reign. In a sense he "restricts his field of consciousness," and at once frees or emancipates a system of ideas that give quite a new color to his personality. The emancipated system of ideas and emotions were hitherto hidden away in his sub-conscious self. To quote Janet's own words, "Hysteria is a form of mental depression characterized by the restriction of the field of personal consciousness, and a tendency to dissociation and emancipation of the systems of ideas and functions that constitute personality."

Hence there is a tendency to complete division of the personality, and sub-conscious mental conditions grow and form a kind of second personality." The patient resembles one suffering from loss of memory or chronic absent-mindedness. Père Antonin Eymieu, S.J.,⁵ basing himself on the teaching of M. Janet, sees in hysteria, as in obsession, a deficiency or lowering of vital tension. The two psycho-neuroses, however, differ essentially. "Restriction of the field of consciousness and dislocation of the personality, two characteristics which are absent in obsession, are essential to hysteria." Dwelling on this characteristic restriction of the field of consciousness in the hysteric, Father Eymieu points out that many phenomena which ought to be assimilated into his conscious "ego" are either imperfectly assimilated or having been assimilated, quickly escape and form a union in the sub-conscious with analogous phenomena of which the hysteric knows nothing.⁶

The dislocation of personality takes place when the conscious "ego" yields place to this group of sub-conscious phenomena which, rising from the depths, dominate the personality for a time. "This habitual ego weakens quickly to give place to another which unites with those phenomena just sub-conscious. One might say that in itself con-

⁵ *Le Gouvernement de Soi-même*, Part II, *L'Obsession et le Scrupule* (Perrin & Cie.), p. 195. Also *Introd.*, p. 7.

⁶ *Ibid.*, p. 196.

science has two faces of which now the one and then the other is turned toward the light.”⁷ This tendency toward such dislocation is *unconscious* in the hysteric,⁸ but conscious in the obsessed person.

In fine, in the hysteric, according to Père Eymieu, whatever vital energy is available is used in energizing excessively a field of consciousness that is restricted, while part of the ordinary functions of life are carried on by the sub-conscious.⁹ This energy secures in the hysteric the carrying out of his hallucinary purpose. “That is why the hysteric completes (pushes to the end) only certain phenomena, but he more than completes them.”¹⁰ The obsessed person stops short, in default of vital energy, and fails to carry out, or put into effect, his hallucinary purpose.

For Babinski the most important characteristic of hysteria was the fact that its symptoms could be produced by suggestion, and banished by suggestion or persuasion, a condition of things to which he gave the name of *pithiatism*.¹¹ Hysteria was for him a condition of higher suggestibility, and he defined it as “a pathological state manifested by disorders which it is possible to reproduce exactly by suggestion in certain subjects, and which can be made to disappear by the influence of persuasion (counter-suggestion) alone.” This theory, however,

⁷ *Ibid.*, p. 197.

⁸ *Ibid.*, p. 198 (footnote).

⁹ Cf. *ibid.*, p. 200.

¹⁰ *Ibid.*

¹¹ From *πειθώ*, I persuade, and *ίαρός*, curable.

does not do justice to the affective, emotional aspect of hysteria. Emotion is not suggestion, and yet it is emotion which usually produces hysterical symptoms, and banishes them. Under the influence of shock one affective state is substituted for another, and often hysterical symptoms disappear as if by magic in the presence of danger. It would be more correct to say that the symptoms of hysteria are produced by emotion, and curable by emotion alone, than to say with Babinski that they are produced by suggestion and cured by suggestion alone.

Déjérine's theory of hysteria does full justice to this emotional character — "his view is that the origin of the hysterical symptom lies in some emotional traumatism, and the fixation of the symptom follows after a period of incubation when the emotional shock, reinforced by internal emotion, has sounded the depths of personality."¹² This theory is, however, vague and incomplete, and it is due to the work of Freud that we have a clearer insight into the mechanism of hysteria.

Freud claims to have discovered behind the hysterical symptom what he calls a "sub-conscious motive."¹³ This motive is of the nature of a sub-conscious "wish," and it explains both the duration and the nature of the hysterical symptom.

A hysterical patient is often looked upon as a

¹² *Functional Nerve Disease* (Ed. by H. Crichton Miller), p. 46.

¹³ *Motive* is used here in a much broader and looser sense than the scholastic "motive."

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malingerer. He himself is not conscious of malingering. He believes in his symptoms; for instance, in his so-called "paralyzed" arm. He is not pretending. Yet at times of excitement he temporarily puts aside his paralysis and uses his arm. What is the meaning of this pseudo-paralysis? Freud answers that in the patient's sub-conscious mind there lies hidden a motive, of which he is unaware, for maintaining the paralysis of the arm.¹⁴ It is the case of the abnormal activity of a factor in buried experience already referred to.

An interesting illustration of the working of such an unconscious factor is found in the hypnotic phenomenon called "post-hypnotic suggestion." If a subject under hypnosis is told that ten minutes after being aroused from his sleep he is to pull down the blinds of the room he is in, he will carry out the order faithfully, although he will have no conscious recollection of having received such an order, and he will be unable to give a sound reason for his action. This activity of an unconscious factor in his mind, a factor due to the suggestion he received under hypnosis, illustrates fairly well the working of the Freudian motive in a hysterical patient, which causes him to maintain his symptom, and indignantly to repudiate the accusation of malingering. Simply, he does not know of the existence of the motive; as Maurice Nicoll writes,¹⁵ "no neurotic

¹⁴ We reserve criticism of this theory to a later chapter.

¹⁵ *Functional Nerve Disease* (Edit. by H. Crichton Miller), p. 132 (already quoted).

can explain the reason of his phobias, obsessions, anxieties and other symptoms, because the cause of them is not found in consciousness."

At this point in our work it is difficult to offer any thorough-going criticism of such theories of hysteria as those we have outlined, in particular those of Janet and Freud. Janet's theory rests on the assumption that each one has a certain limited supply of "*vital energy*," and that psychological functioning begins to fail when the "tension" of this energy falls *below par*. Wastage of energy, or an excessive demand on it, brings down the "tension" and hysteria with its special feature of "double personality," or an obsession, results at once.

His assertion that the "field of consciousness" is restricted in hysteria is obviously true. Those who analyze their state of mind when they are gripped by a hysterical fit of laughter will see clearly that their attention is caught and held by some laughter-provoking object, and that the "field of consciousness" is for the moment circumscribed. To save themselves they must pay attention to things outside this field and extend their attention to other objects. But Janet does not sufficiently explain why it is that the "field of consciousness" is limited to this object rather than to that. Nor does he show what it is that energizes to such an extent the idea or emotion or symptom which plays the central rôle in the hysteria.

As regards Freud's theory of hysteria, there is much to be said in its favor. It supplies what is wanting in Janet's theory, namely, a hypothesis to explain the energizing of the symptom; and it offers a good explanation for the phenomena of "traumatic hysteria," that peculiar kind of unconscious or semi-conscious malingering whereby, for instance, an injured employee fails to recover from his complaint until a court of law has adjudged him damages under the employers' liability act.

Let us for a moment, accept, tentatively, the idea of an "unconscious motive," somewhat in the sense of Père Eymieu, S.J.,¹⁶ and examine hysteria from this point of view. Let us use the word *motive* in its widest sense, so as to embrace half-conscious wishes, or wishes we do not advert to, together with certain instinctive tendencies and impulses based on past experiences and education, which are perhaps at the basis of our inexplicable likes and dislikes, moods and fancies. Let us suppose, in fine, that there are more or less unconscious factors which play a part, even though a minor part, in conduct. To accept help from McDougall,¹⁷ "the difficulty that most men find in accepting the notion of unconscious mental processes may be softened for the reader if he will reflect that much of his normal mental life is only very partially expressed in consciousness, that he is unaware (at times, of some)

¹⁶ See p. 3 above — "of which the subject ignores the existence."

¹⁷ *Functional Nerve Disease*, p. 185.

of the motives of his own deliberate actions, and can recollect nothing of many past experiences which have contributed to shape his tastes, his moral and intellectual principles, his ideals, his character and his motives. And he must recognize that, when we use for the description of unconscious mental processes, the terms in which we are accustomed to describe our conscious mental life, we take a certain liberty, justified by the lack of any other terminology. When, for example, Dr. Prideaux says that every hysterical symptom has its unconscious motive, he means that it is the outcome of a teleological or purposive activity which implies and depends upon the recognition of the patient's circumstances, and the way by which they will be affected by the symptom; as when a "shell-shocked" soldier becomes paraplegic or mute during his recovery from the first acute symptoms, the appearance of this disability is dependent upon the knowledge that such a disability will render him unfit to return to the line . . . and yet the patient is honestly ignorant of this connection."

Neurologists like Stoddart, when convinced, through personal experience, of the working value of this hypothesis, assert positively that, "the only radical cure for hysteria is to discover the unconscious strivings which have given rise to the disease, and in so doing to reveal them to the patient."¹⁸

¹⁸ *The Mind and its Disorders*, p. 247 (ed. 1921).

Most of us are in a position, by appealing to our own personal experience, to test the value of this theory of the "unconscious motive" as the basis of hysterical symptoms, for when we look back on our own lives we are sure to find that from time to time we have suffered, temporarily at least, from some symptom or other of hysteria in a more or less decided form. At one time we lost our voices and were unable to speak through the influence of emotion (*aphonia*). At another time our hands trembled to such an extent that what we wrote was quite illegible (*tremor, and motor ataxis*). We have all had bad dreams in which we struggled in vain to stir or get out of the way of the visualized danger, and perhaps we woke up still unable to stir for a while (*hysterical paralysis*). Most of us have at times awakened to consciousness, from day-dreams or sleep, asking, "Where am I?" (*amnesia, and dissociation of experience*). Sometimes, without well knowing why, we felt ready to fall; we experienced a kind of psychical dizziness, not exactly through faintness, but through self-suggestion of an emotional kind (*astasia*). Sudden shock has left us at times not only speechless, but confused, bewildered and insensible to sensory stimuli (*anaesthesia*). We have had sudden lapses of memory, mind-blanks: temporary hallucinations, perhaps of something spirit-like hovering by us or rushing past us. We have had fits of hysterical laughter, periods of blushing, stammering, and nervous diffi-

culty in swallowing (*globus hystericus*). At times we have been swept away by feeling, our eyes filling with tears, our hearts beating rapidly, at a touchingly worded phrase in a speech, or at a well-sung verse. In mild and transitory forms hysterical symptoms have often affected us, and we can without difficulty picture the possibility of such symptoms settling upon us for a considerable time. We have then at our disposal the materials for testing the worth of the theory of "*the unconscious motive*." It is true that this "motive" is often, very often, perhaps, half-conscious. But on the other hand its power and force remain unknown to us, and its results are surprising. The boy parting from his mother to go to America, knows well that his love for his mother will upset him when he is bidding her "good-bye." But does he realize its "physiological force"? At parting, he completely loses the power to speak,¹⁹ he loses his voice, and has a temporary hysterical attack. The pious novice who bursts into uncontrollable laughter in the chapel, on hearing a snore or a donkey braying, is amazed at the force of the ill-understood and unsuspected "motive" at the back of his mind which manifests itself in this way. A close analysis of the mental processes leading up to such hysterical symptoms repays the labor.

Again in the case of stammerers, it is usually some unrecognized or unconscious emotional tendency

¹⁹ Incident founded on fact.

which is the source of the trouble.²⁰ Some feeling or impulse is expressing itself in this hysterical garb. If the impulse or, according to the terminology we are using, "the unconscious motive," were discovered and revealed to the stammerer, he would be greatly benefited and possibly cured. The reason or proof of this assertion is, however, more easily asked for than given. For the moment all we can say is that experience in psycho-therapy tends to justify it. In psycho-therapy, as in medicine, there are remedies known to be efficacious, although the reason for their curative effect is a mystery.²¹

A few points remain to be referred to before we conclude this chapter. Firstly, as regards the aetiology of hysteria, and secondly as regards treatment and prognosis.

As regards the *aetiology*, heredity is admittedly a predisposing factor, but it is not now considered to be so important as early environment. "More important than inborn heredity as a cause or predisposition is the influence of the parents and environment on the mind of the child during its development. A good deal of what has been put down to heredity in the past is the result of this influence; *the predisposition is not so much inherited as acquired*. Association with timorous or cruel parents and harmful experiences in early life lay the founda-

²⁰ The present writer has recently come across two such distressing cases where the stammer resulted from shock.

²¹ In a later chapter this matter will be fully discussed.

tions of the hysterical disposition.”²² Malformation of character is then a potent cause. A child whose instinctive egoistic tendencies are developed unchecked, who gives way to every impulse, and who when thwarted takes refuge in violent emotional outbursts, or in simulated sickness, acquires the subconscious habit of “converting” his ideas or wishes into outward symptoms, and becomes a potential hysteric. Hysteria usually occurs in early adult life, and is many times more common in females than in males. It often starts about the time of puberty, and an over-quick development of the mental powers, or a too early enjoyment of the excitements of life seem to conduce to it. Shock of some kind is usually the *exciting* cause.

It is nevertheless in some “activity” of repressed emotion or instinct that the source of trouble must be looked for. In soldiers, during the war, *the repression of the self-preservation instinct* was the cause of many nervous breakdowns. A soldier, whose mental equilibrium is none too stable, finds himself at the front a prey to fear and to a sense of shame. He fears for his safety, and yet he is ashamed to fly. He tries to repress his fear, and while he succeeds perhaps in driving it below the surface, he fails to adjust himself to the difficulties and dangers of his trench life. He remains afraid of his repressed fear. His moral and mental equilibrium grows more unsteady. The violent repres-

²² *Functional Nerve Disease*, p. 53.

sion of his emotion of fear puts too great a strain on him. In his sub-consciousness he becomes more and more a coward and, at least unconsciously, he is seeking a means of escape. In this state of conscious and unconscious conflict (to which his dreams would bear witness were they interpreted aright), a sudden shock occurs. Perhaps he is knocked senseless (though physically uninjured) by a shell explosion. When brought to, he is found to be mute or blind or paralyzed, *hysterically*. His hysteria had its origin in the repression and mental conflict, not in the stunning explosion.²³

In civil life the most ordinary source of hysteria is found in mental conflict connected with the sex instinct. This instinct which is so strong and so deeply rooted is subject to the most stringent repression. At times moral duty in this matter is so far misunderstood that some strive not only to repress manifestations of the instinct, but to crush the very instinct itself, which of course is an impossible task. Shame often prevents people from seeking advice or guidance in their secret struggles, and the result is that the conflict is all the more intense and agonizing. The instinct under proper direction can be "sublimated."²⁴ An ardent pursuit of knowledge, of social reform, or interest in hobbies or games draws off much of the emotional energy liable

²³ This is the hypothesis commonly accepted *at present*.

²⁴ This is the *technical term* for drawing off energy and re-directing it from harmful to useful channels.

to be aroused in this connection. If hysteria does result from the continuance of the conflict, it should, to some extent, be interpreted in terms of sex. While we are far from agreeing with Freud in his views on this question, it may be useful to refer to them. "Freud's view is that the hysteric has inherited a psycho-sexual constitution with an excessive development of the sexual instinct, and that there is an underlying sexual meaning in every hysterical symptom, using the word *sexual* in its widest sense to include affection, love, shame and anything which is in any remote way connected with sexual activities."²⁵ It may be added that many modern neurologists affirm "that it is in the domain of sex that the key is found to the origin of hysteria in peace-time."²⁶

As regards the *prognosis*, mild cases of hysteria often recover without any special treatment. Severe cases are usually curable if treated properly, but they tend to relapse. A failure in treatment is very detrimental, as it suggests to the patient's mind that his case is incurable. The duration in the case of hysteria does not tell so much against the possibility of a cure as in other mental diseases, as, for instance, in obsession, but naturally hysteria is more easily cured when the patient is young and the disease of recent origin. Hypnotism and suggestion, of themselves, cannot effect a permanent cure, but

²⁵ *Functional Nerve Disease*, p. 52.

²⁶ *Ibid.*, p. 53.

they may prove helpful adjuncts in treatment. There must, of course, be a careful "mental exploration" and a painstaking "mental readjustment" of the patient, combined as far as possible with a "rest-cure" in the broad sense, to secure permanent amelioration. But we postpone discussion of psycho-therapeutic methods to later chapters.

CHAPTER VI

OBSESSION

EVERY person suffering from nerve-trouble is *obsessed* to some extent. Obsession mingles with hysteria, neurasthenia and the neuroses. Still, for didactic purposes, it may be regarded as a distinct form of psycho-neurosis. It is exceedingly common, not only among the abnormal, but even among those who are otherwise mentally normal. When some particular thought, feeling or impulse persists and predominates to such an extent in one's mind as to become a real annoyance, one is said to be obsessed for the time being. It may be a catchy rhyme which obsesses us, or the thought of one we love, or an anxiety about business, or about a sick friend, or a fear of catching an infection, or a restless impulse to leave home and travel; whatever it is, there is always some *centre* in the mind which is constantly bursting into activity, without any apparent cause, and which the will is powerless to calm or suppress. "Every cerebral manifestation," writes Legrain, "either of the intellect or of the affections, which in spite of the efforts of the will, forces itself upon the mind, thus interrupting for a time or in an intermittent manner

the regular course of association of ideas, is an obsession."

The obsession, then, whether mild or severe, has certain characteristics: (1) It recurs incessantly. (2) Direct resistance proves useless and usually only increases its intensity. (3) Mental anguish is felt during such resistance. (4) There is a temporary relief when the obsession is yielded to. (5) The obsessed person usually sees quite clearly the folly of the obsession (*folie lucide*), but is none the less held by it.¹

Obsession has not been shown to be connected with any organic trouble in particular. It seems to be purely and simply a disease of the mind, a psycho-neurosis, although one must suspect that there is in obsession a concomitant hyper-sensitivity of some neurons in the brain. While it is true that neuropaths are more likely to have obsessions than others, and while it is also true that obsessions are more trying and severe when the general health is low, it is also true that perfectly healthy folk suffer from obsessions. No serious mental or bodily harm follows from even a severe obsession unless it be of long duration. The mental fatigue and exhaustion occasioned by it are of little consequence. Sleep and digestion are perhaps temporarily impaired, but memory, perception and intelligence remain keen and sound. As we shall see, however, it entails much suffering, and if of long duration gradually undermines the health.

¹ Cf. *The Mind and its Disorders*, p. 255.

Obsession usually manifests itself in the form of an *irrepressible thought* or an *irrepressible fear* or an *irrepressible impulse*.

The irrepressible thought may be the conviction that one is damned or bankrupt, or going mad, or possessed by the devil. Or it may take the form of a doubt, constantly recurring. "Perhaps there is no God." "Perhaps it was a sin to do that." "Perhaps I do not love my children." The thought may take any one of a million forms, but in its clinging, worrying, restless persistency it is ever the same.

In the case of irrepressible fears or phobias the fear may be connected with high places (acrophobia) or narrow confined places (claustrophobia) or broad open spaces (agoraphobia) or it may be a fear of some animals (zoophobia) or of blushing (ereutophobia) or of dirt and contagion (mysophobia) or of using bad and blasphemous expressions (coprolalia).

An obsession may be connected with the most diverse objects, from spiders to Zeppelins, and may take the most varied forms. Stoddart² records a grotesque obsession of a patient who, when he saw an ink-well would be overwhelmed with fear lest someone was drowning in it. "He realized the absurdity of such an idea and resisted the temptation to go back and look into the ink-well, but resistance was useless; he suffered mental torture until he had gone back and satisfied himself that there was no-

² *Ibid.*, p. 254.

body in the ink. This case illustrates the relationship between the irresistible fears and irresistible impulses mentioned below."

Of *irresistible impulses* a very common form is that of counting (arithmomania). The patient counts seven or ten before he answers a question or counts the number of steps on a stairs, the number of windows in a house, etc. Another form is that of doing everything and placing everything about in threes or sevens or in a certain order or form.

Perhaps superstitions as regards numbers are founded on this type of impulse. The impulse to touch things, a universal life-long game of "tag," is another obsession. The patient hits lamp-posts with his stick as he passes, or perhaps steps up on hackney-cars, touches a rug and gets down. Some people are compelled by their obsession to read what is written on every bit of paper they see, or to read all the advertisements on placards or in newspapers, others must be ever poking up the fire, or setting things ablaze (pyromania),³ or stealing and collecting (kleptomania), or echoing and repeating actions or expressions (echolalia). The impulse may take a more serious form and become homicidal or suicidal. At such a stage it verges on insanity, and indeed, it should be remarked that in many cases of obsession it is difficult to draw the line between sanity and insanity.

³ Some of these forms of obsession have been referred to already.

Many theories of obsession have been put forward, notably those of Pierre Janet, Freud and Vittoz. They are all helpful in a way, though no one of them seems completely satisfactory.

To understand these theories, to which we shall only very cursorily allude, it is necessary to distinguish clearly between the "*content*" of the obsession and the obsession as "*a psychical entity or process.*" The "*content*" may be the idea, "I'm going mad," "X is going to kill me," "perhaps there is no God," "a cat brings me misfortune." The "*psychical entity*" of the obsession is its vital framework or mechanism, together with its effective and emotional intensity; in fine its value as a mental activity. The "*content*," then, is the conceptual or ideational element of obsession as distinguished from its psychical force.

Now "*the content*" of an obsession is more or less a matter of indifference. A most trivial and absurd idea can be the content of a very terrible obsession (as in Dr. Stoddart's case in which the "*idea*" or "*content*" was that somebody might be drowning in an ink-well). And we shall see later on how a silly and ridiculous "*idea*" may be the "*content*" of very severe "*scruples.*" What is important in an obsession is, therefore, not the contained idea or fear or impulse, but the psychical force of the obsession and the depths of its roots, in so far as it is a habitual process.

Now, as regards the theories of obsession, Pierre

Janet (and with him Père Antonin Eymieu, S.J.), attributes obsession to a lowering of the tension or vital psychical force. If the psychical energy available for mind work is over-taxed, wasted, and finally exhausted, the tension of psychical force sinks, and mental processes are no longer energized in a normal way. Voluntary inhibition fails, and obsessions become irresistible.

For Freud the great emotional power behind an obsession is due to what he calls "transference of affect." Some important thought, rich in emotional energy, lying in the sub-conscious, gets connected with some unimportant thought in the conscious mind, and transfers to it all its emotional force. The emotional background of one thought becomes that of another thought; the sub-conscious makes thus an irruption into the conscious life. Vittoz (and with him L'Abbé d'Agnel) also regards the obsession as the result of an invasion of the sub-conscious into consciousness, although his point of view is different from that of Freud. The invasion occurs owing to the loss of "cerebral control." Like Janet, he sees in the obsessed person imperfection in the mental processes of attention, concentration and volition. This imperfection results in a loss of touch with reality and loss of self-mastery. Vittoz' theory may be looked upon as a compromise between the theories of Janet and Freud. These theories will be discussed more fully elsewhere, and will be better understood in the light of the psy-

chology of the obsessed person, with which we shall now deal.

It is all-important to take into account the psychology of the obsessed patient, and to follow the development of the obsession. Usually he does not know how the obsession originated, although he may be able to give the approximate date, and the general circumstances of its origin. At first it is merely a bother. Later on it becomes more recurrent and annoying. Headaches and depression are experienced, and discouragement grows as the patient begins to realize his impotence to banish the obsessing thought. He sees that the obsession is foolish, and a nuisance, and yet he cannot rid himself of it. The fear that it is going to return, prepares the way for its return. The patient begins to lose heart and either thinks that he will never be fully free from it, or that he is going mad. Sometimes it will seem to him that the obsession is in his mind all day long. Late at night, right up to the moment that he is falling asleep, and early in the morning on awakening, it is still there. In interesting chats, or while playing games it may disappear, but only to return once more. The patient reasons and argues against the obsession, but all is in vain. He cannot come to realize that, as such, the contained thought, for instance, "perhaps there is no God," has no value at all, and that in reality his faith is neither tempted nor involved in any way in the obsession. He fails to see that

it is the *psychical entity of the obsession, its framework and the concomitant feelings*, which alone are of importance. Nevertheless the thought contained in the obsession, which he takes to be a *real* thought, depresses him. He takes it seriously. His feelings of depression persist and are at once a cause and a consequence of the trouble. It becomes hard to say finally, whether it is the obsession that brings on the depression, or the depression that stimulates the obsession. Usually in treatment it is best to try and banish the feelings of fear, sadness, loneliness and discouragement, and to get the patient to create even "artificial" feelings of gaiety, courage and confidence. If the patient succeeds in doing this the obsession will grow less intense, less persistent, and may gradually wear away.⁴

But an obsessed patient is exceedingly helpless and exceedingly hard to deal with. His "scruples" or thought or impulse is ever before him.

He is convinced that the other "doesn't understand." He is unable to make efforts in the right way, and along the right lines. He fails to understand the advice given, and feels little confidence in it; and the longer the trouble lasts, the more difficult he is to deal with. The association-field of his obsessing thought is ever widening, and it becomes more and more easy to stir the obsession to activity.

⁴ Such would be an "indirect" cure. It is probably in this way that many are cured, more or less, in haphazard fashion.

“If obsessions constantly recur,” writes Maurice Craig,⁵ “they tend to become more elaborate and organized and in the course of time usurp the whole attention. The patient strives hard to put the idea out of his mind but it recurs with greater force, and clustering round it with ever-increasing numbers are the vague fears and doubts. The ideas and fears form a complex, for secondary ideas have become associated with the primary idea, and any one of these ideas coming into consciousness may bring in the whole complex. A psychasthenic may be travelling comfortably in a railway carriage, talking with a friend; the conversation ceases for a moment and suddenly he realizes he is in a train, and at once the complex comes in with all its associated ideas and fears and the man becomes bathed with perspiration owing to a great sense of anguish. So with all the other types of irrepressible thought.”

The definition given by Hack Tuke brings out the essential point, the consciousness of helplessness in the patient. “Imperative ideas,” he writes, “are morbid suggestions and ideas imperiously demanding notice, the patient being painfully conscious of their domination over his wish and will.” And yet this distressing mental condition may occur in a perfectly healthy organism.

It is well, if possible, to get the obsessed person to realize that obsessions of various kinds are very common, and that for a cure, all that is required

⁵ *Psychological Medicine*, p. 297.

is to shake off the fortuitous mental habit that has sprung up and to awaken from the bad dream in which he finds himself. This advice, of course, becomes doubly efficacious if it is possible to show the patient, and to get him to understand, how the mental habit originated. Neurologists recommend rest, good nourishment, fresh air and some healthy outdoor exercise which is well within the patient's strength. Agreeable companionship and pleasurable entertainment help to put the patient in a better frame of mind. Suggestion and hypnosis are of use at times, but they cannot effect a complete or permanent cure. As we shall see later, the surest means of cure is a well-conducted and skilful exploration of the patient's mind, together with a readjustment of his outlook on life.

So far we have described some characteristics of obsession, and have enumerated various types of obsession; we have also analyzed the "psychology" of the obsessed person and briefly referred to theories and treatment. The prognosis of obsession is uncertain; some recover, some do not; apparently trivial cases turn out to be incurable; and apparently hopeless cases are cured. The aetiology is likewise mysterious. The disease develops unperceived. Then the patient is "caught," and he is helpless. The grip may be relentless, or it may give way.

The whole trouble is mysterious beyond words. That level-headed and broad-minded saints like

Alphonsus Liguori, or Ignatius of Loyola should become subject to foolish scruples and obsessions which they knew to be ridiculous, and harmful to mind and body, is surely a marvel. That a great modern general should be fearless at the front and a craven coward at home before a cat is likewise a mystery.

When we find ourselves face to face with a clear case of obsession we realize what a baffling mystery it is.

Here is a young man, healthy, clever, good-natured, high-minded and yet "gripped" by the terrible disease — miserable, crying, hopeless, depressed. "The thought was worrying me all day. I was frightened and depressed. I feel very bad." And yet his cheeks have the glow of health, and he was out in the fresh air all day with agreeable work and companionship. No use to advise. No use to argue. No use to suggest. He evades every remedy and turns everything into a source for aggravating his obsession. You explain in the clearest way how his obsession is "only a habit, and not a thing to worry over," but it is absolutely useless. You send him away, perhaps a bit easier, and somewhat comforted. Next day he returns worse than ever. You get a gleam of hope from some hint he gives that his obsession is changing in form. No use. The next day it is the same as ever. You ask him if any exercise or remedy you have suggested or advice you have given has helped

him at all. He looks at you sadly. No, he doesn't remember *anything* having helped him. He never will give you the least encouragement to persevere in your efforts to cure him. He dampens all your ardor, discourages all your enterprise, opposes all your suggestions. He acts as one *determined* to deepen and energize his obsession. He fights as it were to make his obsession worse and to prevent any interference with it. He convinces himself of his helplessness and of your incapacity. He obeys you in a half-hearted, tolerant way, but there is no energy, no seriousness in his obedience. You become convinced that he is not corresponding and cooperating. You take him to be a malingerer. But he is not to blame. It is his disease which is fighting you. He is a cypher. *His will is impotent*, he is slave to an apparently calculating and insidious foe that defies your efforts. It is as though he were possessed by a devil.

He will tell you that he is anxious to be cured. That he is trying to get well. He will be hurt if you doubt his word and good intentions. And it is unfair to presume that he is deceiving you. *Consciously* he is trying to get well. But you know you are confronted by a "*resistance*." And you are forced into the hypothesis that his "sub-conscious will" is resisting. Now, unless that resistance is overcome, cure is impossible.

Why does his "sub-conscious will" or whatever else it is, resist? What is the meaning of this sui-

cidal effort and tendency? Why does the obsessed person, as neurologists write, "cling to his symptoms?" Is there anything else that he needs, and yearns for, more than a cure? There must be, otherwise his sub-conscious would not resist. Is it some over-mastering passion seeking a satisfaction of which it would be bereft were the cure to succeed? We cannot reject such a hypothesis too quickly. If it is an over-mastering passion, what passion is it? What does it tend towards?

Here it is that we find some help from the study of the dreams of an obsessed person, for in dreams, in some form or other, such a passion is bound to betray itself. The "passion" may be a yearning to get home, as in an exile. Or it may be a yearning for safety from danger, as in a soldier. Or it may be a desire to escape from some galling condition of life or detested association with someone. Whatever it is, it serves as a source of energy to the obsessing idea.

How does the transference of energy take place? Is there any similar mental process to help us to understand it?

In volitional phenomena we have something of the same nature. To will the end entails willing the means. If the will is set on attaining an object, it attaches importance to the means of attaining it. If your heart is set on passing an examination, you will go to great pains to get the best books, to have a good reading lamp, to escape from distrac-

tions. You set, in a sense, the same amount of importance on securing the books as on passing the examination. All the minor acts leading up to the result are energized by the emotion with which you desire the end. There is "transference of energy," but in the case I am considering it is a conscious and intelligent transference. In obsession, energy is transferred unconsciously and apart from intelligence. You are, let us suppose, on foreign service. Within you there is a deep yearning to get home, more or less conscious, though you cannot gage its strength. You develop an obsession, let us say, a worrying thought, accompanied by great depression. You think you are predestined to be damned, and you cannot get the idea out of your mind. Treatment fails, and you grow worse. There is "resistance" to treatment. If you are cured you will remain on foreign service, which you hate. You are anxious *consciously* to be cured. But somewhere in the depths of your mind there lies, closely connected with the desire to get home, the feeling that if your obsession lasts you will be sent home.⁶ You cling to your obsession. When finally you are sent home you improve rapidly and the obsession disappears.

Such, in a crude form, is the theory of obsession that seems to fit in best with facts. One becomes strongly inclined to accept it, meeting as one does,

⁶ See p. 2. Freud here posits what he calls a "*transference of affect*."

with cases that verify it accurately. It is the hypothesis of "the unconscious wish or will or striving." And unless this unconscious wish be discovered and revealed it is almost hopeless to look for a recovery.

CHAPTER VII

SCRUPLES

IN THIS chapter it is our purpose to put forward the theory, accepted by Père Antonin Eymieu, S.J., L'Abbé d'Agnel and others, that "*scruples*" is a type of obsession, and *per se* a purely natural nerve trouble or psycho-neurosis. The fact that it has to do with religious doubts and fears has made Catholics hesitate about regarding it as a mere mental disease. They have looked upon it as pertaining to the supernatural, and as being a trouble to be dealt with by the priest in the confessional, to the exclusion of interference by the neurologist. Further, it has come to be regarded in the light of a moral stigma, and scrupulous people, unlike hysterical or neurasthenic people, are supposed to suffer from a kind of disequilibrium of conscience.

Now, the theory which we propose is that "*scruples*" is a form obsession takes when the subject is preoccupied with religious ideas and practices. As an obsessed business man sees loss of trade and bankruptcy in everything, so the obsessed religious man sees loss of grace and sin in everything. The "content" of the obsession in the former case is *money*; in the latter case it is *super-*

natural grace. The "psychical entity" of the obsession in each case is, as we shall see, quite similar. The apparent difference between the two kinds of obsession lies in the element which is of least moment — namely, the content. The neurologist who is concerned with the origin and sources of the obsession, and cares little or nothing about the content, will naturally pursue the same method of treatment in each case. He will treat each type of obsession as a mind trouble pure and simple, and will have recourse to natural (scientific) methods of treatment in each case, as though he were dealing with two cases of neurasthenia or of hysterical paralysis.

Let us for a moment compare a case of scruples and an obsession, supposing the former to be a case where the subject is ever and always dissatisfied with his confessions, fearing there is a stain of sin on his soul, and the latter a case of mysophobia, in which the patient is ever and always afraid of some soil or stain on his hands. The latter obsessed person is always washing his hands. This is his irresistible impulse. The former is always going to confession, "to wash his soul." This is his irresistible impulse.

Now when we look into the psychology of these patients we find it the same in each case. The psychological symptoms are identical, and the physical symptoms are exactly parallel. Each recognizes the folly of his obsession — "*folie lucide.*"

Each is equally impatient *vis à vis* of his impulse. There is in each the same tendency to dissociation. The interval in which the patient is his true self, normal, bright, interested in others and in life is followed by the interval in which his personality is changed, and he is anxious, depressed, uninterested in others and in life, preoccupied with his obsession. He lives a double life; he plays the parts of two persons. Again, each patient in the same subtle way, resists remedial measures, refuses consciously or sub-consciously to cooperate with his director or adviser. Each alike regards his director as being out of touch with him, unable to understand his case; and so obedience is yielded only in a half-hearted, doubting way. The fretfulness, helplessness, mental anguish and the obvious incapacity to help self is in each case the same.

When we return to the physical symptoms we find a close parallel. From the anxious twitching of the fingers to the haunted look in the eyes; from the debility and physical lassitude, to the excitability in moments of crisis, the parallel is obvious. The same unhealthiness, weakness or exhaustion, and loss of physical vigor is seen in each case, and when more serious symptoms appear they too are identical.

Apart from the striking similarity and parallelism between the psychical and physical symptoms of scruples and obsessions, there is clear evidence that they originate in precisely the same way. Where

there has been excessive expenditure of psychical energy amounting almost to exhaustion, an emotional shock of even a trivial kind is sufficient to start scruples or an obsession. Again and again we find this fact verified; we shall return to it again. The origins of the two mental troubles differ as little as do the symptoms, or the general courses of the diseases. There is then every reason for identifying them, and regarding scruples as a form of obsession.

The great Catholic ascetic writers, like St. Alphonsus, St. Vincent de Paul, St. Francis de Sales, etc., were keenly alive to the natural aspect of scruples, and their writings are replete with wise advice concerning purely natural treatment. They saw as clearly as St. Ignatius that scruples lead to such "an extreme state of anxiety, such a miserable perturbation of soul," that spiritual progress is hindered¹ and they were extraordinarily anxious to cure their penitents by every legitimate means.

St. Alphonsus was so convinced that scruples is a mental disease, an abnormality that incapacitated the judgment and the will, that he treated scrupulous persons as to some extent *ex lex* as regarded the integrity of confession. Fénelon saw in them a kind of madness, "une espèce de déraison." "Do not listen to your over-lively imagination," he wrote to one of his penitents,² "it is too fertile in imagery.

¹ Cf. St. Ignatius' *Exercises*, "Rules for Scruples."

² Cf. *Lettres spirituelles*, No. 281.

This prodigious activity consumes your body and makes your spirit dry. You are devouring yourself uselessly." Père Eymieu, S.J.,³ quotes from a letter written by one of his scrupulous penitents, which brings out very well the symptoms of scruples as a natural disease, in particular the "double-personality" character. "Don't judge the gay, confident, ardent child, full of earnestness and energy, by the miserable creature that is now before you. Scruples have left their mark. They have torn asunder my personality, ruining all my powers, and have left me helpless and wounded, a butt to every suggestion. What you see in me is not what was written on the primitive vellum; another writing conceals that. One would have to remove all that has been over-written, as in the case of old parchments, to reawaken the child of long ago."

At this point we must turn to what is considered a classic though brief treatise on scruples, the famous "Rules" of St. Ignatius which are found in his *Spiritual Exercises*. These rules deal rather with elucidating what "a scruple" is, than with the state resulting from a constant recurrence of scruples. In his first rule he shows that a scruple is not a mere "error of judgment." An error of judgment is easily corrected and occurs in every type of mind. But "scruples" is not cured by having a wrong judgment corrected. Errors of judgment are not *per se* accompanied by the anxiety

³ *Le Gouvernement de Soi-même*, 11. 33.

and trouble of mind that accompany scruples. Secondly, a scruple is not a "delicacy of conscience," as St. Ignatius shows in his fourth rule. Delicacy of conscience is to be found in the soul of every good Christian, and is quite compatible with perfect calm and peace of mind. A scruple, however, while being more likely to spring up in a delicate conscience, is not incompatible with a dullness or grossness of conscience in other matters, outside the range of activity of the scruple. A man may be meticulously hyper-sensitive and scrupulous about chastity, and exceedingly lax about honesty. Scruples are often wrongly identified with a great and abiding fear of offending God by sin. Such fear should normally be in the soul of every good Christian, and is, like delicacy of conscience, quite compatible with serenity of soul. The fear in the heart of the scrupulous person is an abnormal, unreasonable fear, fretful and perturbing. It is not that fear of God which is a virtue.

There is an uneasiness of conscience and a melancholy dissatisfaction of soul, which must be clearly distinguished from scruples. It is a kind of remorse that results from very careless or perhaps dishonest confessions. Such remorse and perturbation disappears after a well-made confession which "clears up" the past. Scruples cannot be disposed of in this way.

Lastly, it is important to distinguish scruples from "religious melancholia" in which the afflicted

person is obsessed with the thought that he is damned or abandoned by God. This state is an advanced obsession of another kind, and one which often borders on dementia. But the whole mentality of the scrupulous person distinguishes him clearly from the dement. The scrupulous person sees and understands this state, and the absurdity of his scruples. His is a "*folie lucide*." He sees what is wrong, but cannot escape from his trouble.

Thus far we have been discussing *what scruples are not*. Now let us see what they are. St. Ignatius explains a scruple in the following manner: He considers the case of a man who treads upon a cross made of straws. He does so unwittingly. He notices what he has done and thinks he has committed a sin. This is not a scruple, says St. Ignatius, but an error of judgment. Later on, he begins to reflect, and from without (*extrinsecus*) a suspicion that he has committed a sin comes into his mind. (Perhaps he begins to fancy that he stepped upon the cross deliberately; but he is not sure.) There follows, however, the thought that he has not sinned at all. A certain state of doubt "ambiguity," and perturbation of mind stirred up by the mental debate results. This now is a scruple according to St. Ignatius. Hence "*perturbation of mind consequent upon a doubt concerning the matter of sin*" is the essence of the scruple. In the fourth rule St. Ignatius points out how in a delicate conscience this perturbation can become so intense

as to make one "miserably upset in mind"; that is, when normal delicacy of conscience is pushed to extremes. This is injurious for spiritual progress. Hence we gather that St. Ignatius saw in an over-straining of mental analysis and attention, in a mental effort to discriminate too finely in the matter of sin, the cause of scruple.

Here then we are confronted with the *natural cause of scruples* — *over-strain with resulting exhaustion of mental processes*. And we have here too the *natural* result — perturbation, and anxiety of mind. But all this takes place in connection with the moral conscience; and the "content" of the scruples, regarding it for the moment in the light of an obsession, is sin in some form or other.

What now does St. Ignatius suggest by way of cure? The fifth rule merely tells us to oppose the tendency to over-delicacy of conscience, or laxity, which the enemy has aroused in us for our destruction, and bids us avoid extremes. We are "to keep the soul itself in a quiet and secure middle state" ("in medio quodam quieto et securo statu") so that it may become altogether calm. Hence "strain" is to be avoided, and if the words "*omnino quietam*" suggest a certain sensible or affective calmness, we have an implied recommendation to cultivate psychological tranquillity.

It is clear that, in this advice, we have in outline a natural psycho-therapy. Strain in mental analysis is to be avoided, and mental calm secured — that

is, a psychical line of treatment to banish the "perturbation" of scruples. It is advice given in a supernatural way and from out a religious atmosphere. But, like similar advice given by St. Alphonsus, St. Francis de Sales, St. Vincent de Paul and other great ascetical writers, it implies a recognition of the use of natural means in combating the evil. And it is interesting to notice how Père Eymieu, S.J., whose standpoint is purely and strictly scientific comes to give the same advice as St. Ignatius. Having shown how scruples, as a type of obsession, result from wastage of psychical energy, he indicates how the wastage through overstrain and dissipation of force, must be stopped by avoiding precisely this kind of tension. When the wastage is stopped, and the tension of psychical energy reaches again its normal level, the scruples can be overcome and driven out from the mind.

It is not our purpose here to treat of the supernatural causes of scruples. St. Ignatius, when he alludes to the interference of the devil with a delicate conscience, is speaking of the supernatural element in scruples. We are keeping strictly to the natural element. As Père Eymieu points out ⁴ "su-

⁴ *Le Gouvernement de Soi-même. L'Obsession et le Scrupule*, by Antonin Eymieu, S.J. (Perrin, Paris, 27th ed., 1922). In a footnote Père Eymieu adds (pp. 122 and 123): "Here, in experimental psychology we must exercise equal care to affirm nothing beyond our proofs or deny anything outside our subject. To abstract is not to deny. To indicate the immediate and constituent causes of a phenomenon is not to rob it of its origin or to declare other interventions impossible."

pernatural causes are at work especially in the lives of Saints, but here we are concerned with *natural* causes which play their part too. The supernatural respects the natural; even when it controls the natural it allows it to play its part, and "it is to nature that we must attribute natural effects, until the contrary is proved." (C'est à la nature que nous devons rapporter, jusqu'au preuve du contraire, les effets naturels.) When, therefore, the natural causes and the natural explanation of scruples are put forward, it must not be supposed that there is no room for supernatural intervention as well. Scruples, like other diseases of the mind, or indeed like bodily ailments, can very well be due also, and in a supereminent way, to supernatural causes. But as Père Eymieu points out, "the supernatural respects the natural; even when it controls the natural, it allows it to play its part," and a disease even though due in this way to supernatural cause, demands, as a true natural disease, to be treated by the best natural means.

The fact that the "content" or ideational element in the scruple concerns the supernatural does not at all militate against this view. For the "content" is not the important element in the scruple; indeed it matters little what the content is, whether it concern God or Mammon; the important element of the scruple is its psychical entity, its vital force, its value as a mental habit. This we have already pointed out, and this it is which constitutes it a mental disease or psycho-neurosis.

Dealing with the scruples from which St. Ignatius suffered at Manresa, Père Eymieu first of all points out that, as far as can be known, St. Ignatius was not predisposed to scruples either by personal temperament or through heredity. He was eminently sane, level-headed, and came from a healthy stock. He was by no means neurasthenic; still less was he a likely subject for obsessions or hallucinations, and yet he suffered in an extreme degree from scruples for a period. "Days and nights passed in this terrible torture. Struggling continually, with himself, he sought to determine what was and what was not sin; whether he ought, yes or no, confess certain past faults. The more he strove to see clearly, the more he was overwhelmed with darkness."⁵ Added to this there were suicidal tendencies and promptings to despair. Now what was the *natural cause*, apart from the supernatural, of this mental breakdown? Père Eymieu attributes it to the fact that St. Ignatius over-taxed his mental energy.⁶ He had proposed to himself the gigantic task of utterly reforming his whole life. He suddenly set himself, in the midst of his vigils, penances and mortifications; that is, at a time when his natural psychical force was already heavily taxed, to conform his whole conduct to the highest ideal. The strain was too great. Mental processes could no longer function normally. The "tension" of his psychical force fell below par and he could no longer control normally the

⁵ Cf. Bartoli's *Life of St. Ignatius*.

⁶ Cf. *L'Obsession et Le Scrupule*, p. 123.

functions of his mind. Scruples resulted. The case of St. Ignatius was not unique. St. Alphonsus, St. Aloysius, St. Bonaventure, St. Francis de Sales, St. Augustine and others had like painful experiences. And, to take lesser examples, the strain of noviceship life frequently results in novices becoming afflicted with scruples. In all this, very clearly, nature plays its part, and even in the spiritual life the laws of nature cannot be utterly disregarded.

L'Abbé d'Agnel is no less frank than Père Eymieu in regarding scruples as a natural disease.⁷ To sum up his views, "The scruple is not a malady of the physiological or moral order. It is as distinct from neurasthenia as from the moral states of doubt, discouragement and religious ignorance. It is altogether independent of the moral value of the patient; it may be seen in a St. Ignatius or in a school-girl of imperfect virtue. The fear of offending God, which springs from the delicacy of conscience of a Saint, belongs to the moral order. But the analogous fear (the obsessing phobia) in a scrupulous person belongs uniquely to the psychical order, and it has to be studied from the psychical point of view. In the case of the Saint, religion and morality are at play; in the case of the scrupulous person there is question only of psychical functioning. The former case belongs to the spiritual director; the latter to the psycho-therapist. The rôle of the

⁷ Cf. *Direction de Conscience (Psychothérapie des Troubles Nerveux)* by L'Abbé d'Agnel and Dr. d'Espineux (Téqui, Paris, 1922), pp. 389-391.

latter is limited to reducing to normality and regularity the disordered functioning of the psychical faculties. There is no question of vices or faults that are conscious and voluntary, but only of functional trouble.⁸ If it is right to struggle against faults and vices by a wise and firm direction of conscience, it is right to struggle against true scruples by a series of appropriate exercises, of the natural order, such as those acts of consciousness and concentration designed by Dr. Vittoz." In fine, L'Abbé d'Agnel would send a scrupulous person for treatment to a nerve specialist, just as he would send the victim of a hallucination, or of neurasthenia. For him *scruples* is a form of obsession, and like obsession it is a psycho-neurosis pure and simple. As regards the natural methods of curing scruples, every good system of psycho-therapy for dealing with obsession, when skilfully applied, will effect improvement, if not complete cure, where cure is possible. The prognosis, at least in the case of the young, is good. Mental analysis, combined with suggestion, and perhaps even hypnotism⁹ is the safest, and surest method, although difficult and often tedious. The method of Père Eymieu, founded

⁸ Père Eymieu refuses to regard a true scruple in the light of a temptation. "Temptation does not exist when the ego spontaneously detests it." Père Raymond, O.P., also regards scruples as a natural disease.

⁹ Readers will see from Chapter XVI on "*Hypnotism*" that the Church insists on certain safeguards. These safeguards should be faithfully adhered to.

on that of Janet, is also excellent. Treatment by merely external means such as the "Weir-Mitchell rest cure," hydro-therapy, electro-therapy, have the advantage of toning up the system as a whole, although less likely to effect a complete and permanent cure than the purely psychical methods. The system of Dr. Vittoz of Lausanne, which Abbé d'Agnel recommends as the best, is very skilfully designed, and seems to have had extraordinary success. Perhaps a few words about this method will make a suitable conclusion to this chapter. It is a strictly psychical method, and especially applicable to obsessing scruples. Abbé d'Agnel thus summarizes this method: ¹⁰

"Consciousness, in the scrupulous, as in all who are obsessed, only fulfils its rôle imperfectly *vis à vis* of its unconscious which is ever more prone to rush in where resistance weakens. Hence there is in the scrupulous a certain tendency to dissociation of the personality which, however, never results in such a 'doubling' as is general in cases of hysteria. To cure a scrupulous person, you must enable him to control normally his obsessing thoughts, which thereupon cease to trouble him. So long as he is not master, his cure is incomplete. It is, therefore, the reeducation of cerebral control which is necessary, and it is this reeducation that Dr. Vittoz seeks in his treatment of the psycho-neuroses." Again, "in

¹⁰ *Direction de Conscience*, p. 377. We shall treat of this method more fully later on.

order to fight efficaciously a psychical evil, one must, logically, treat the psychical source. To eliminate from a patient his scruple is the same thing as to reduce to orderly functioning his psychical activities.”¹¹ Dr. Vittoz does not make a frontal attack on the scruple itself. He is quite indifferent to the “content” or ideational element of the scruple. He refuses, as did St. Alphonsus, to discuss or argue with the scrupulous person. He begins by imposing on him a command not to talk of the nature of his scruple. Dr. Vittoz then sets the patient to perform day by day, simple and ingenious exercises of the senses, calculated to get the patient in touch with sensible, concrete reality. Then follow simple exercises of concentration, and volition. The exercises are graded and varied. The patient is trained to eliminate sensations, memories and ideas. The will is toned up, and the power to make efforts is developed.

Meanwhile, a real desire of being cured and a sincere cooperation on the part of the patient is aroused. The whole method is indirect and aims at the recovery of “cerebral control” and the regularizing of mental functionings. No doubt there is the element of suggestion present, but it is not over-emphasized. When the patient has been won back to a normal state of adjustment to external reality; when his personality is reassociated, and when his mental process, especially his volitional powers, are

¹¹ *Ibid.*, p. 378.

once more normal, the scruples have no longer any terror for him or any hold upon him. He is cured.

This is but a brief and imperfect summary of the Vittoz method of mental reeducation. But it will suffice to show along what lines the treatment runs.

To conclude, let us appeal for a frank recognition of the fact that "scruples" is a mere nerve disease, though concerned with facts of the moral order. The central interest of the pious man or woman is his state of soul. The obsession that grips his exhausted or weakened mind deals naturally with the chief interest of his life, religion, and hence the "content" of the obsession of a pious person concerns sin. The central interest of the business man as such is profit and financial stability. When his mind is weakened or exhausted, and he becomes obsessed, the obsession deals with his chief interest too, and it turns on the idea of bankruptcy or failure or ill-health and incapacity to trade. The hand of God is present in each case. All illness comes from God, though its natural causes can also be determined. In no case is it lawful to lose sight of the supernatural — and least of all in scruples, where the affairs of the soul are so much at stake. To the supernatural one must always have recourse. But on the other hand, both the pious man and the business man act wisely and legitimately in availing themselves of the resources of nature, and of science, in striving to win back their health of mind.

CHAPTER VIII

NEURASTHENIA

NEURASTHENIA, literally nerve-weakness, is a much misunderstood term. It is applied indiscriminately to various kinds of nerve trouble, especially to those which defy analysis. Being a "soft term," to which few people object, it can be used without causing much resentment, and as a consequence neurasthenia has come to be regarded as a "dust-heap" disease, comprising everything from chronic headache to languidity and depression.

But "neurasthenia," when rightly understood, is a very definite mental disease and one which must be classed, like hysteria and obsession, as a psycho-neurosis. It bears close resemblance to "chronic nervous exhaustion," and to the beginnings of many diseases such as "exophthalmic goitre" and "general paralysis," but is, nevertheless, quite distinct from them.

It has, up till recently, been regarded as a neurosis, rather than a psycho-neurosis, on account of the many physical symptoms which accompany it, and on account of the efficacy of physical treatment in bringing about cure. Craig, who holds this

view,¹ reserves the term *neurasthenia* for "those cases which exhibit a marked tendency to nerve fatigue throughout life, and in which are associated marked disturbances of the various organs of the body, more especially the stomach." Dr. William White finds fatigability, irritable weakness and inability to concentrate attention to be the fundamental symptoms of this disease. Sometimes hysterical symptoms are also present, constituting a kind of hysterо-neurasthenia. There is usually a tendency to hypochondria. Stoddart,² whose view we are following in regarding neurasthenia as a psycho-neurosis, writes: "Neurasthenia is a disorder which makes its appearance in early adult life and is chiefly characterized by an increased susceptibility to fatigue on slight exertion, mental or physical. It appears to be necessary to insist that it is a definite disease and not a 'rubbish-heap.'"

There are various reasons for regarding neurasthenia as a strictly psychical disorder. Although there may be a hereditary predisposition to it, its source and excitants are nearly always, as far as one can see, psychical in nature. Mental strain and worry, combined with emotional shocks, and such moral and intellectual upheavals as are involved in conversion, or the moral tension concerned with fighting passion or striving to deaden con-

¹ *Psychological Medicine*, p. 254.

² *Mind and its Disorders*, p. 226.

science, or the psychical wastage which goes on in long-continued ambitious efforts to achieve what is beyond one's power—in such psychical causes neurasthenia often has its source. Adolescence, with the awakening of sex-passion, is often marked by neurasthenic symptoms. It is said to be more common in men than in women, and to be found in people of every social class and of every nation. It is often found in the otherwise healthy and robust, and every effort to find a physical source for it has failed. In fact all the evidence goes to show that the disease is connected with loss or wastage of psychical energy, due to disordered mental functioning. Van Gieson has suggested that the patient's store of nervous energy has been "squandered by his ancestors," but probably "the more correct view," writes Stoddart,³ "is that abnormal behavior of parents, during the infancy of the patient, is responsible for his inability to engage in the battle of life in a normal way. The aetiological factor is his own life history."

Amongst the exciting determinants of neurasthenia, besides those referred to in the last paragraph, we find also the following: Excessive study when young, together with severe examination tests at too early an age; severe illnesses with long and distressing periods of recuperation; long continued bad habits (of masturbation); the physical strain and excitement of violent athletic exercises; irregu-

³ *Ibid.*, p. 227.

larity as regards nutrition and sleep; chronic insomnia; chronic digestive trouble with its toxic consequences; physical accidents with consequent shock. But the chief source and determinant of neurasthenia is that to which we have referred, the strain of mental worry or of long and intense volitional efforts to subdue instinct or emotion, or to banish some obsessing thought.

It may be asked why neurasthenia afflicts so many members of the "idle rich" class, if its chief source is *strain and excessive volitional effort*. The "idle rich" seem to be spared strain and effort. But curiously enough a life which is utterly devoid of earnest endeavor and purposefulness is also a breeding ground for neurasthenia. The rich society lady, who does no work and whose sole pursuit is pleasure, finds very soon that she cannot kill the game or kill enough of it to satisfy her cravings. She is tortured by her yearnings. She is always dreaming dreams that fail to materialize. Her conflict with *reality* is intense. She cuts and tears herself, mind and body, in her hopeless struggle. She strives in vain, like the bird, to escape from the cage, fluttering round and round in the vain hope of finding a golden gate opening on the fair realm of euphoria. Disappointment and disillusionment in the end weigh on her wearied spirit. She frets and becomes introvert. She has regressed to her infantile days. Symptoms break out, headache, fatigue, irritability, ennui. All the symptoms tell the story of the excessive struggle

her spirit has made, and of the strain she has undergone. Had she only had a fair share of hard, absorbing work, she would not have had to don the widow weeds of neurasthenia.

It is worth while to dwell briefly on the symptoms of neurasthenia, both mental and physical. The chief mental symptom is the intense sense of fatigue and inability to make an effort. There are phobias too, various and varying; sometimes a "sense of the unreality of things"; irritability and loss of self-control; feelings of depression, heaviness, giddiness; annoyance at bright lights or monotonous sounds; jerkiness of thought and movement. Sometimes slight traces of hysteria appear, with failure of memory. Volitional attention is maintained with difficulty, which results in the exhausting process of again and again recalling the wandering attention by a will-effort. These will-efforts cause a deep sense of fatigue and become increasingly more difficult. "In many cases even the thought of doing anything causes the patient trouble and he breaks into a profuse perspiration."⁴ This is the characteristic *ergophobia*, dread of work. If given a new kind of exercise or task the patient does not improve on practice, but on the contrary disimproves as the task continues.

If the patient, for instance, is given a sheet of paper with columns of figures to be added (Weygandt's method) mistakes begin earlier than in a

⁴ *Ibid.*, p. 229.

normal individual, and from the first the additions are done more and more slowly. With a normal individual there is a marked quickening, owing to practice. When put to an "ergograph" test it is found also that in a neurasthenic patient fatigue sets in at once. After reading for a short while a neurasthenic complains that his eyes ache, and frequently he suffers from "specks" before his eyes. Strange feelings of pressure, or "screwy and crawling" sensations are felt in the head. The mental functions are on the whole fairly normal; but the emotional feeling is one of helplessness, of being "done up," and of anxiety about the future.

The physical symptoms vary to a great extent. The "knee-jerk" and deep reflexes are usually increased. The complexion is pale; the eyelids are inclined to droop; the skin is moister than natural, and the palms of the hand are bathed in sweat. There is at times a distinct throbbing of the abdominal aorta, a symptom which is at once curious and difficult to understand. Sleep is often disturbed, and unrefreshing, and some patients suffer from insomnia. Digestive troubles too are common. Palpitations occur, and the pupils dilate rapidly and on the slightest excitement. Singing in the ears is another symptom, and tremors of the facial muscles are common. Sometimes there is a loss of weight, but on the other hand the patient may be exceedingly robust and healthy in appearance. On the whole the physical symptoms are not very different

from those accompanying other nerve-troubles, but the *mental symptom of fatigue* both in respect to its intensity and its special quality is distinctly characteristic.

As regards the pathology of neurasthenia nothing is definitely known. It is often attributed to auto-intoxication on account of its relation to fatigue states. But auto-intoxication while being perhaps a condition, cannot be the chief cause. Neurasthenia occurs without any observable auto-intoxication, often in persons of pure-blood and healthy digestion. The chief cause, as we shall see, must be sought for in disorder of mental functioning.

The course of neurasthenia is slow and tedious. It develops slowly. Symptoms come and go rapidly. Unless there be skilful treatment, whether dictated by unsophisticated good sense, or by scientific technique, some symptoms will gradually deepen and harden, and an ultimate complete breakdown is to be expected. But even under the best treatment improvement is on the whole slow. The correcting of disordered mental functioning and the saving and increasing of vital tension take much time. Even great improvement of bodily health will not entail the disappearance of neurasthenia. The prognosis is, however, good when such an improvement of bodily health takes place, especially in the case of the young. Those over fifty seldom recover completely, though improvement seems possible in the majority of cases. A neurasthenic patient will have,

of course, "good days" as well as "bad days," but an attempt to restart at energetic work will usually be followed by a relapse.

As regards treatment, apart from analysis, which according to Stoddart ⁵ and many others of the new school of neurology, "is the only certain cure for neurasthenia," improvement is secured by such "rest cures" as that known as the "Weir-Mitchell" system, or some adaptation of it. Complete rest for a time, with good nutrition, electrical massage and hydro-therapy, does good. If neurasthenia be treated as though it were mere chronic nervous exhaustion there is usually amelioration, even though a complete recovery be not secured. "The physician must point out," writes Craig, ⁶ "that since the disorder results from an extended period of ill-regulated living, it will require a long period of care and treatment to reestablish the health." Rest in bed has often to be prescribed. Much physical or gymnastic exercise is exhausting and bad. It is best to be cut off from home and home interests, and quite in the hands of strangers. Abundant fresh air and cheerfulness are above all indispensable.

When we come to discuss the source of neurasthenia we have a very difficult and delicate problem. Until quite recently it was supposed to be directly the result of sexual disorder, but this view has come to be modified to a great extent. No

⁵ *Mind and its Disorders.*

⁶ *Psychological Medicine*, p. 259.

doubt some neurasthenias originate in this way directly, some indirectly. But there is a more general cause which, while not excluding that of sex disorder, goes more deeply into the matter. There is evidently a wastage of psychical and nervous energy, resulting in fatigue and incapacity to make further efforts. But how does this habit of wasting energy arise? The bird that flies from side to side of its cage, vainly trying to find a way out, is exhausting its physical energy in fruitless efforts, for it is attempting an impossible task. The man who would be so foolish as to try to bring down a big oak tree by persistently pulling at it or shoving against it would likewise be exhausting *physical* energy in vain efforts. Similarly, the neurasthenic often exhausts his psychical energy by ceaseless efforts of a useless kind. He, moreover, has the misfortune to have formed a mental habit of making this useless expenditure of energy, and so, to cure him, it is not only necessary to discover what the habit is, but also to abolish the habit. We shall see later on that injurious mental habits are best abolished, if we replace them by healthy habits.

Let us illustrate these remarks by reference to the following case of a young man who acquired a stammer as a result of a severe shock when a boy of seven. The stammer was for many years exceedingly severe. The sufferer, however, determined by sheer force of will to overcome it. He used to work himself up into a state of extreme nervous tension,

and then, using immense volitional effort literally to force the words one by one in a loud, harsh voice from his lips. He was utterly exhausted by the process. He began to stir up the same state of nervous tension whenever he had to study or accomplish a difficult task. As a result he became seriously neurasthenic and all the characteristic symptoms, mental as well as physical, made their appearance. Here again we find wastage of nervous energy due to disordered mental functioning. The will was being used to replace the imagination, and to do work that should have been accomplished unconsciously and automatically. Let us take another example. This was the case of a youth, under twenty years, whose ideals of chastity were such that he regarded even temptation as a "fault" to be avoided by the will, and who exhausted himself in the fruitless effort to eliminate from his nature the sex-instinct itself. If in any way whatever the instinct in question manifested itself, it was a cause of the deepest misery and personal recrimination for him, and he set himself to work again by feverish will-efforts to prevent any recurrence of what he regarded as a moral fault. Needless to say, dreadful headaches, depression, fatigue and all the other symptoms of neurasthenia resulted. All his nervous energy was used up. His will failed to function normally and he broke down.

Clinical experience tends to show, firstly that neurasthenia is a psychical disease, a psycho-neuro-

sis, and secondly that it is due to a disorder of the functioning of mental processes. The will is vainly striving, and goes on in virtue of its habit of striving, to achieve the impossible. There results a kind of miscarriage of effort, which translates itself into a kind of fatigue and mental blank. A patient described the genesis of this state of mental blank very well. It was the patient who had striven to overcome the stammer by will-effort. "Sometimes," he said, "when driving in a motor car, in a more or less relaxed condition of mind, if my attention is suddenly called to something, I at once make an effort to concentrate my attention, my sense perception on the object. There follows at once a temporary state of mental blankness though at the same time I feel that an output of will-effort is going on. But this will-effort, meant to awaken sense perception, only results in a vague striving against a kind of psychical darkness. After that, sense-perception becomes active, and I see the object to which my attention has been called." It is hardly necessary to adduce further examples. Every reader will have met with many in his own experience, and will be able to find in them the characteristic "wastage process" going on.

Neurasthenia is, then, a disease which first of all calls for a mental reeducation. The mind of the subject must be very carefully studied. The disordered mental habit must be discovered, and some other habit of mind must be put in its place. The

task is difficult and tedious, but no other way of curing the disease completely and permanently is possible. If the disordered habit of mind is dropped, the wastage of nervous energy will cease, and with it the fatigue engendered by this wastage. The depression, too, which is the outcome of the patient's sense of powerlessness and poverty of initiative, will also disappear.

Although a psycho-neurosis, neurasthenia yields to external, physical treatment. The reason, perhaps, is that external treatment supplies just that kind of general suggestion which is most efficacious in this disease. The D'Arsonval high-frequency electrical treatment is particularly efficacious. The psychical symptoms of neurasthenia are so varied and varying that it is puzzling to know which among them are most significant. By disregarding them to some extent, and concentrating a physical treatment, excellent results are obtained. Nevertheless in the more serious cases, skilful analysis is necessary for a permanent cure.

CHAPTER IX

THE HIDDEN SOURCES OF THE PSYCHO-NEUROSES

SOMEWHERE in those vast halls of memory, of which St. Augustine wrote, there hide items of experience, some of them very harmful and troublesome, that have been driven down and repressed, but which still influence our emotional and intellectual life in an indirect way. Some of them are restlessly active, and disturbing. These we call "*complexes*." They constitute the hidden sources of our mental troubles, or psycho-neuroses. They are the "*reptiles in the profound abyss of the mind*." And, in order to neutralize the harm they work, a flood of light must be thrown upon them. They must be dragged up into the field of consciousness. For in psycho-therapeutic treatment the unconscious, or semi-conscious factors that energize the neurotic symptoms must be rendered fully conscious.

Now, the memory is stored with experiences, and there is hardly an object around which many experiences, some remembered, some at least partly forgotten, do not cluster. These experiences give a meaning, a significance to the object. And hence it is that every object we look at has two meanings

for us, one conscious and the other unconscious. When *the unconscious significance of an object is very strong* that object has a *powerful compulsion effect on us*. This truth, when put in plainer language, will be readily recognized. Some picture, or stanza in a poem, or passage in a speech may exercise a profound influence upon us, although we fail to find in consciousness the reason for this influence. Tears may spring to our eyes as we look at some commonplace piece of scenery, or listen to some quite ordinary tale of sorrow. A chord that lies deep and hidden in our hearts is touched, how or why we know not, but "*the unconscious significance of the object is (somehow) very strong*" for us and it exercises "*a powerful compulsion effect on us.*" Were we to search back into our past experience for the explanation of the mysterious emotion, for "*its hidden source,*" we should be doing what neurologists do in the case of psycho-neurotic symptoms. We do not admit, however, that "hidden sources" are so often beneath the threshold of consciousness as neurologists pretend.

The task of discovering such "hidden sources" of emotional phenomena and of unravelling the past is one, it must be confessed, of extraordinary difficulty and delicacy. "There is certainly no such brain-racking work in any other department of medicine or surgery or probably in any other profession," writes Dr. Stoddart.¹ There are so many

¹ *The Mind and its Disorders*, p. 225 (Lewis & Co., London, 1921).

false clues and the true clue may be very faint and ill-defined, leading back perhaps to experiences of early childhood. Yet, difficult though the task be, it has to be faced, for in psycho-therapy almost everything depends on finding out the origin of the neurosis. When a patient can be brought to see clearly *where, when, how and under what conditions of mind, body and external circumstances* the trouble started, the cure is well begun. As Stoddart writes,² "the direct exciting cause of an attack of hysteria is usually some fright, shock or disappointment, not necessarily so severe that it would make a profound impression on anybody, but of such a nature that it provokes an abnormal reaction in the very patient under investigation, because of his special experiences of an earlier date, perhaps of childhood." Hence we have to distinguish between the occasion or "exciting cause" which provoked the appearance or outbreak of the psycho-neurosis, and the deeper-lying experiences which prepared the way for it and laid its foundations. Such mental disorders are certainly very frequently traceable to some incidents in the patient's past experience which determine the nature of the trouble. Such experiences must, if possible, be discovered and revealed to the patient. Once more, let us say, that in its broad outline this theory of "the hidden sources" is thoroughly common-sense, Catholic and scholastic. At first sight it may seem

² *Ibid.*, p. 234.

far-fetched, especially if it be forgotten that the theory has to do with abnormal individuals, folk whose mental equilibrium is decidedly upset. But on reflection it will be seen to be an eminently sane theory, capable too of indefinite illustrations from the spiritual life of the soul.

Many of us worry over the conduct of our friends or over some problem of life because for the moment we leave out of count a factor well-known to us, but for the moment outside the field of consciousness. The moment the factor, " $x = y$," enters again the field of consciousness the problem is solved and our worry disappears. Other times we stand preoccupied, like Macbeth, although the source of our preoccupation is not very clear to us. Macbeth's excuse, "*My dull brain was wrought, with things forgotten,*" is the kind of explanation we have to give of the phenomenon. Sometimes a chance remark cuts us to the quick or arouses fierce jealousy or anger in us. We are at first surprised that we should take it so much to heart. But on reflection we find that it has reopened some old and perhaps long forgotten sore, or rearoused and rekindled a passion that we thought was long since dead. In such cases, and they are very frequent, we have "the hidden source" theory exemplified in the regions of morals. It is only too clear that much of our nervousness, as, for instance, before a sermon or a speech, is the result of a habit (engendered perhaps by auto-suggestion), which

originated in some long forgotten mishap when as children we had occasion to make some effort in public. The failure on that occasion "to adapt ourselves to circumstances" was the cause of subsequent failures or nervousness. Indeed it may be said that all psycho-neuroses are the result of a failure in adaptation on the part of the individual to circumstances. One of the reasons why an "obsession" holds such an imperious sway over the mind of the patient is that for him it is a mystery. It is there, inexorably, and he can see no cause for it, no explanation of it. He cannot explain the reason of his phobias and obsessions because the cause of them is not found in consciousness. In other words the source is hidden. It may have been of recent date, or of early date. It may be "hidden" only in the sense that it is not averted to. But while it is hidden, the neurosis gains force through its inexplicability.

We shall now give a few examples, illustrative of the matter in hand, firstly dealing with cases in which the "hidden source" was of recent date, secondly with cases in which the "hidden source" lay far back in the past.

Sometimes the discovery of a connection between the obsession and an incident of the recent past will be sufficient to cause it to disappear. Campbell Thompson³ records a case of limited claustro-

³ *Diseases of the Nervous System* (Cassell & Coy, 1921), p. 480.

phobia (fear of narrow-spaces) in which the trouble was got rid of in this manner. An ex-soldier experienced an unaccountable dread whenever he entered an electric car. He was mystified and greatly distressed at this symptom. He was not afraid of being in trains or tunnels or other "narrow spaces," as is usual in such cases, but when in an electric car he was quite unnerved. The source of this phobia was ultimately discovered to be an unconscious mental association between the whistling sound of the trolley on the wire, and the whistling sound of a certain type of shell in the air. This association awoke within him emotions of fear and horror, for it was through the explosion of such a shell in his dug-out in France that several of his companions were killed or maimed, and he himself seriously shaken. Here the *origin of the trouble* lay in a recent event.

Another example, recorded by A. A. Brill,⁴ may perhaps be given. A young man came to a psychoanalyst suffering from an obsessing thought about "*killing time*." Even when the analyst was speaking to him he used to interrupt with questions about "*killing time*." "Why not talk about killing time? It is the only thing that matters." The obsession was so persistent that he could do no work, and became a nervous wreck. After a rather long analysis of the patient's past, through the agency

⁴ *Psychanalysis* (Saunders & Coy, 1914), p. 118. In this example the "association" was apparently long-standing.

of association-words, the source of the obsession was discovered.

The patient had been very fond of his mother, and rather jealous of and hostile towards his father. His mother died, and his father, much to his disgust, married again. He felt a great loathing for his father, but did not realize how intense this loathing was, or to what extent it was tinged with a homicidal tendency. On one occasion he had seen a picture of "Father Time," scythe in hand, slaying many people. The picture became rooted in his imagination and exercised a strange fascination over him. Analysis revealed the fact that *the face* of "*Father Time*" was associated in his mind with his father. Both were old-looking and wore big beards. "The killing of Father Time" became for him an obsession. He did not know why, but as it proved, it expressed his sub-conscious, deep desire to get rid of, to put away, "to kill" his own father! It expressed his deep-hidden wish. When this concealed thought of his mind was laid bare before the patient, he immediately recognized its truth, and at once the mystery of his obsession was solved for him, and it disappeared.

Some neuroses are less deeply seated than others, and so are more easily and dramatically cured. One such case is rather amusing. It has reference to a mother-in-law. Besides, it is instructive, inasmuch as it shows how an emotion can translate itself or be "converted" into a physical symptom.

This case, recorded by Dr. H. Crichton Miller, is as follows: A young married woman suffering from an acute pain in her back had in vain sought relief from several medical practitioners of the old school. At length she came to consult a psycho-analyst. During the course of her interviews, in recording her life history, she began to tell the analyst of the various annoyances which she suffered at the hands of her mother-in-law. As she enlarged on this theme it became evident to the analyst that her dislike for her mother-in-law had something to do with her symptom. After a while it revealed itself as a very deep-seated hatred and loathing, so much so that the young woman herself was shocked and astonished when she found out the bitterness of her ill-feeling. The analyst then told her that her pain was nothing else than the external expression of this pent-up feeling of hatred which had remained more or less hidden in her sub-conscious. When the young woman heard and recognized this, the pain at once disappeared and she was cured.

Dr. Rivers records a case of a like nature, which was suddenly and dramatically cured in a very simple way.⁵ It was the case of an ex-officer suffering from terrifying dreams and obsessing thoughts of a most distressing kind. When at the front a shell had struck his dug-out, and although he was unhurt, his brother officer and friend was

⁵ *Instinct and the Unconscious*, by W. H. R. Rivers (cf. Appendix).

mangled in an appalling way and killed instantly. The vision of the dismembered body of his friend continued to haunt him night and day and he broke down completely. A rest-cure failed to give him any relief and he was steadily growing worse. At this stage, in the course of a conversation Dr. Rivers pointed out to him that there was one aspect of the tragedy that occupied his mind, which would give him relief if he dwelt upon it — namely, the fact that his friend's death must have been absolutely painless since it was instantaneous. At once the patient brightened up. He had not dwelt on that thought before, and he felt that he could now admit the awful experience into his mind and adjust it to the rest of his memories. It gave him a *point d'appui*, so to speak, something he could rest upon mentally without too great distress. Improvement set in at once, and the patient was soon cured.

Though such a cure may seem at first sight very simple, it nevertheless means more than appears on the surface. The whole difficulty lay in getting the patient to accept the new point of view and to assimilate the suggestion.

Let us now take some examples where "the hidden source" lay far back in the patients' past. A young man came to an analyst suffering from depression of a very serious kind, together with insomnia, loss of appetite, headache, loss of interest in life, etc. In his case the "exciting determinant" was soon discovered to be a terrifying thought of

damnation which occurred at the closing ceremony of a spiritual retreat which he had made with great fervor. This thought became an obsession, and soon he was on the verge of a complete breakdown. A minute analysis of his previous life, however, showed that on various occasions he had fallen into states of despondency and unhappiness when he found himself treated with harshness, or when he felt that circumstances were menacing. As a boy of ten he had on one occasion awakened at midnight crying bitterly, without knowing the reason. This incident gave the analyst a clue, and he found that the patient at this period had been subjected to a good deal of unfair and rather cruel bantering which he resented keenly. At the time he did not realize how deeply he was suffering. As he was of a sensitive and highly strung disposition the bantering of his companions was to him an outrage and an injustice. He reacted to it, not by fighting them aggressively, or retaliating or laughing it off, but by retiring into himself and allowing himself to become sad and depressed. His mind then acquired the habit of reacting to aggression from *without* and *within* by falling into a state of despondency and depression, accompanied by intense feelings of loneliness and unhappiness.

When the analyst explained to the patient the nature of this "association" which had become habitual with him he was greatly relieved and soon showed signs of improvement. Insomnia, head-

aches and loss of appetite disappeared. Interest in life and work was reawakened and he soon became normal. Two other cases, also of the writer's experience, are illustrative of "the hidden source" theory where the source lay far back in the patients' life-histories. One case was that of a middle-aged man who suffered so much from *claustrophobia* that he had to give up work and spend his days sitting on a bench in Hyde Park. His phobia for narrow spaces originated in his being shut up alone, suffering and frightened, in a tiny room in a garret after a severe fall from a swing when he was a little child.

The other was a very painful stammer case, to which we shall have occasion to refer later on. In this case, the cause of the stammer lay over sixteen years back, and was directly traceable to a narrow escape from drowning under rather peculiar conditions. In neither of these cases were "the incidents" forgotten, but on the other hand they were not adverted to as the causes and sources of the troubles.

One of the most remarkable results of finding and revealing to the patient "the hidden source" of his neurosis is the occurrence of what is called "*abreaction*" or "*catharsis*." The word was first used by Freud and Bruer to describe the emotional state which occurred when a patient relived some painful experience which had been recalled to consciousness from out of the sub-conscious depths of the mind,

where, according to their theory, it existed as a kind of psychic sore causing the neurosis. "Abreaction" often results in the sudden disappearance of the obsession, compulsion or hysterical paralysis with which a patient is afflicted. The term is grandiose, perhaps, but it indicates an undeniable psychological phenomenon, and it is no unusual experience for a spiritual director to find an extraordinary improvement in the mental health and outlook on life in a penitent who has made a general confession in which with assistance he has been enabled to discover and reveal grave sins, perhaps of early life, which had more or less disappeared from his memory.

A case illustrative of abreaction is recorded of a girl suffering from hysterical paralysis of the right arm. For years she had been unable to use it, and she was unable to recall to mind any fright or shock that could have occasioned it. The psycho-analyst hypnotized her. Under hypnosis the questioning was continued, and the girl then told how one night when very young she had awakened to find a rat on the coverlet of her bed quite close to her exposed hand and arm. With a cry she withdrew her hand. Soon after she fell asleep, but in the morning she found her right arm was paralyzed. On being awakened from her hypnotic state, the incident was recalled to her conscious mind, and she was encouraged to reawaken her feelings of fright and horror and to relive the incident. The girl did so

with all the signs of true emotion, and at once she recovered the use of her arm. She had successfully "abreacted" the incident, and in technical terms, she succeeded in "adjusting" the incident to the rest of her experience — she "assimilated" it, and the paralysis which was the expression of an "un-assimilated" experience, lost its *raison d'être* and disappeared.

The search into the life-history of the patient, in the course of psycho-therapeutic treatment, has thus in view not only the discovery of the origin of the nervous trouble, but the securing of the beneficial effects of "*abreaction*" or "*catharsis*." This "mental exploration" also paves the way for the "mental readjustment" or reeducation that is to fit the patient for his part in life. As Campbell Thompson writes,⁶ "the main object underlying the different forms of psycho-therapy is to 'explore' the patient's mind and to find out the origin of his nervous symptoms, so enabling the trouble to be recognized, and the ideas to be rearranged with a view to their better adaptation to the events of daily life."

In psycho-therapy it is of little use to treat symptoms, and hence it is that suggestion and hypnotism are of themselves insufficient in dealing with neuroses. Unless the origin and source is discovered and removed, there can be no cure. One symptom may be disposed of, but only to give rise to another.

⁶ *Diseases of the Nervous System*, p. 505.

A point deserving emphasis is the need of *dealing with a neurosis as an entity*, and of taking into account the form it assumes in the individual patient. A broken leg is, to take a crude example, the same entity in this man or that. It is treated identically in each case. The same may be said for the majority of organic diseases. But in the case of mental trouble things are quite different. The psycho-neurosis of this man is a different entity from the psycho-neurosis of that man. A special treatment is required in each case, and a detailed knowledge of the psychology of the individual is indispensable. As A. A. Brill writes,⁷ "Without individual psychology the riddle of the neuroses . . . must remain unsolved"; and again,⁸ "Psycho-analysis is the only system of psycho-therapy that deals with the neuroses as entities, instead of treating symptoms as do hypnotism, suggestion, and persuasion. . . . Psychoanalysis always concerns itself with the individual as a personality and enters into the deepest recesses of the mind."

Needless to say, it is not easy, even for one of Brill's super-analysts, to enter into "the deepest recesses of the mind." But even if it were easy to enter in, the task of discovering the source of trouble, whether it be a "complex" or a "psychic reptile," would not be easy. There are many, many things in the mind, images, memories, habits, in-

⁷ *Psychoanalysis*, p. 12.

⁸ *Ibid.*, p. 3. Later on we shall examine the claims made on behalf of psycho-analysis as a method of psycho-therapy.

instincts, etc. The source of trouble may be due to the vitalizing and energizing of some "neurological mechanism" that we inherited from our parents in our nervous system. Or it may be due to instinctive tendencies modified in some strange way by our past experiences and present conditions. That there is a source of trouble in the sub-conscious which is harmfully active when we become abnormal we think most probable, but as to its nature we remain ignorant. Perhaps, with increased industry in observing pathological manifestations, we may be brought close to a solution of the problem.

CHAPTER X

METHODS OF PSYCHO-THERAPY OR MIND-HEALING

IN ORDER that mind disease may be successfully treated, it is not sufficient that there should be a good method. The method must be well applied and the patient must himself co-operate. To cure mind-disease is a difficult and delicate matter, and usually it takes a considerable time. And unless the neurologist be competent, the patient willing, and the method well conceived, there is not much chance of success.

The neurologist must be equipped for his work by being thoroughly conversant with normal and abnormal psychology. He must have a practical knowledge, wide and deep, of every phase of the mind's extraordinary complex processes. He must be a keen observer, swift to notice every change or turn in thought and feeling. He must be gifted with natural intuition and capable of doing whatever is humanly possible in the way of thought-reading and in the interpretation of telepathic or semi-telepathic transference of thought.¹ In fine he must be "psychic" — gifted by nature, with a

¹ See Chapter on "Telepathy."

sympathetic insight into the character and mentality of others, and capable of awakening an "understanding" with others.

In character he must be a man who commands confidence and trust, and who has the power to influence others. He must know how to gain and hold this influence, at one time by a certain severity, at another by great charm of manner. He must be high-minded, virtuous, full of reverence for religion and morality; for in the course of treatment he will come into close touch with the soul of his patient, and will hear the secrets of that soul. He must be fully conscious of the dignity and responsibility of his position, for it will be in his power to do much good or evil, moral as well as psychical and physical.

The fact that a neurologist comes into such intimate relations with the mind and soul of his patient makes it a matter of conscience for Catholics to be careful in their choice, when putting themselves under treatment. They must seek a neurologist of unquestioned probity and virtue. This is all the more necessary in the case of young women suffering from nervous disorders, for in the course of treatment the confidence they come to place in the neurologist is usually accompanied with a certain admixture of affection. What is called a "transference" takes place, and sometimes a strong emotion is, as it were, "displaced," being withdrawn from its former object, to be directed towards the

neurologist. The existence of such "transferences" makes it doubly important for patients to take care to find a neurologist who is sure to play his rôle in a perfectly worthy way.

I have said that it is necessary, for successful treatment, that the patient should *cooperate*, and more than once I have referred to the "resistance" that one encounters in trying to help patients. A patient will, of course, say that he is most anxious to be cured, and he will, at first, at least, show docility in the fulfilment of prescriptions given him. But very soon signs of "resistance" appear. He will cling to his own short-sighted interpretation of his symptoms. He will evade answering questions. He will allow himself to think that he is being misunderstood. He will only in a half-hearted way carry out the work of "auto-suggestion."

Now, as we have said, much of this "resistance" is unconscious. It is the patient's unconscious or sub-conscious that is clinging to the symptom and fighting against the neurologist. But, at the same time, it is partly due to a lack of loyal confidence and cooperation on the part of the patient's conscious self. Hence it is all-important, before beginning treatment, to insist on cooperation and to tell the patient plainly that treatment will be broken off at once unless he does his part. Also, to insure cooperation, it is usually advisable, at least in serious cases, to get the patient to some extent under hypnotic or hypnoidal influence. When this in-

fluence is secured, one can count on more loyal co-operation.

We shall now sketch in a general way the new methods of psycho-therapy. The four essential elements of a good method are:

1. Mental exploration.
2. Suggestion and persuasion.
3. Psychological reeducation.
4. Physical rebuilding.

We shall briefly consider these four essential elements in turn.

First, as regards *mental exploration*. This is, *par excellence*, the work of psycho-analysis proper. It implies the winning of an intimate knowledge of the patient's past history, character and mental states. It implies too the discovery, as far as they can be discovered through the technical procedures of "association word tests," "dreams" and "hypnotic questioning,"² whatever secrets lie hidden in the sub-conscious, in the form of "complexes" or unconscious wishes and strivings. It is in the course of mental exploration too that the phenomenon known as *abreaction* takes place, if it can be brought about by skilful management. There is no doubt that this phase of psycho-therapy, the exploring of the patient's mind, is all-important and must never be omitted. Indeed, there is hardly a

² Special chapters will be devoted to "Psycho-Analysis," "Dreams" and "Hypnotism."

detail about a patient's history, character or mental states that is not worth knowing. Trifling incidents in his life, tiny phases of his habits, are all worth noticing and remembering. The more complete the knowledge gained of the patient, both as regards his virtues and his vices, the better hope there is of understanding the source of his malady. But the process of exploring thus fully the patient's mind takes a very considerable time and is not without its difficulties.

As regards the second essential element of psychotherapy, namely, *suggestion and persuasion*, we must point out, first of all, that this element is both inevitable and indispensable. Despite all pretence to the contrary, suggestion is employed, and has to be employed, by all neurologists. It enters into every phase of their work. Its skilful employment is the test of their ability and competence. By it confidence is aroused in the patient, and by it the sympathetic nervous system is won over to co-operate in the cure. It is the influence of mind on mind that counts in the end. And by it chiefly a disordered mind is coaxed and won over to function in an orderly manner.³

The third essential element of psycho-therapy is *psychical reeducation*. This implies the building up again, through systems of mental exercises, the faculties of the mind. Nerve disease entails a dis-

³ In our chapters on "Auto-Suggestion" and "Hypnotism" we shall deal fully with the matter.

ablement of will, of perception, of concentration, and of judgment. These faculties must be won back to a healthy functioning. This can be done only by exercising them healthfully. Hence we have such systems as those of Dr. Vittoz of Lausanne and Père Eymieu, S.J., which give special exercises in perception, concentration and volition. It may be said that what Freud has done, to advertise the importance of mental exploration, and what Coué has done to popularize auto-suggestion, Vittoz is doing to emphasize the need of psychical re-education.⁴ The part which will exercises play in this matter is of exceptional importance, especially when such exercises are inspired by religious motives. Religion itself, when faithfully and devoutly practised affords, needless to say, the best and surest means of psychical reeducation, for in religion, in meditation, prayer and mortification, all the mental faculties are exercised in a calm, joyous, peaceful spirit.

The last essential element of psycho-therapy is physical *rebuilding*, and it stands as the counterpart of psychical reeducation. Body and mind, as we have seen, interact and exchange influences to such an extent that the well-being of the mind is dependent on that of the body, and *vice versa*. Hence, even in the treatment of the psycho-neuroses

⁴ In our chapters on "The Methods of Père Eymieu, S.J., and Dr. Vittoz," and "The Part of the Will in Psycho-therapy," we treat of this matter more fully.

attention must be paid to somatic symptoms, and bodily well-being must be securely established, as far as possible. Rest and change often do good. Sometimes hydro-therapy, and sometimes electro-therapy should be resorted to. The D'Arsonval high-frequency electrical treatment is especially efficacious, as we have seen in neurasthenia.⁵ The "Weir-Mitchell" rest-cure is very helpful in *physical rebuilding*.

It is this fourth element of psycho-therapy, which embraces external and medicinal means of cure, that appeals most to the older and more materialistic school of neurologists. Many of the latter are still bitterly hostile to the purely psychical methods of the new school. And it was only during the war that psychical methods got a fair chance of proving their efficacy. It may be that this success resulted in an excessive disregard for external treatment, and in our opinion the truth lies in the *via media*. Every means must be utilized to the full, and every good method given its due place, in psycho-therapy. As Dr. Crichton Miller wisely remarks,⁶ "It must not be imagined that analytic treatment is to be regarded as entirely superseding other methods. It must necessarily be a factor of most cases, but the experience of the war has taught us that it may suitably be combined with suggestion

⁵ Cf. *The Practitioner*, June, 1918. Article on "Neurasthenia," by Simon H. Bennett.

⁶ Preface to *Functional Nerve Diseases*.

and other agents." It will be seen now that all the modern methods of psycho-therapy stand well together. In no real sense are they antagonistic, one to the other. All can be utilized, to a greater or less extent, in each particular case. Sometimes one, sometimes another will be omitted as unnecessary or perhaps for special reasons injurious. Hypnotism will not always be employed, nor will the exercises of Dr. Vittoz. Two of the elements will always be necessary — namely, mental exploration and suggestion. But even these methods will be varied, so as to suit the condition of the patient.

It will be seen, too, that these elemental principles of psycho-therapy are in perfect accord with Catholicism and the sound good sense of scholastic psychology. Neither in searching a patient's mind for hidden sores, nor in influencing a patient in a proper manner by suggestion, nor in training him to use aright his mental faculties, nor in striving to build up his physical health, is there anything whatsoever that is wrong. When, however, in the spirit of some low-minded and materialistic Freudians patients are encouraged to live a free life, giving free scope to their animal instincts, without regard for the moral law, psycho-therapy becomes an instrument of evil. But no good psychologist or self-respecting neurologist would countenance such treatment. Later on, we shall have to point out certain dangers which arise from hypnotism and psycho-analysis. And we shall indicate how they can be

guarded against. But, inasmuch as they are methods of psycho-therapy, when stripped of unnecessary adjuncts and accretions, they are in themselves *per se* legitimate and good.

Some critics of the new psycho-therapy claim that there is in reality nothing "new" about these methods, while others declare that their efficacy has not been proved. Let us first observe that whether new or old, proven to be efficacious or not, the humanitarian attitude should be to give them a fair chance, in fact, to give them encouragement, in the hope that they may achieve something in the way of lessening the appalling toll of human suffering that follows in the wake of mental disorders. In many countries little or nothing has been done in the past for inmates of mental hospitals. The percentage of cures for mental diseases has remained unchanged at its low level, while the percentage of cures for bodily diseases has rapidly increased. Why is this? And why are inmates of asylums bereft of those advantages which accrue from the advance of science? Are they alone among the sick and suffering to depend on chance for their recovery?

But to return to the points of criticism raised. Is the new psycho-therapy really "new"? Is its efficacy proven?

To the present writer it seems that there is no single element of the new methods that can be called really "new." Whatever "newness" there is lies in the systematization of the best points in the nat-

ural, "common-sense" treatment of nerve-maladies, and in a more skilful application, due to a more exact knowledge of abnormal psychology. Let us take a case in point. The new psycho-therapy has much to say of "pent-up emotion," and of methods to secure a "discharge of emotion," by "sublimation" or other means. And it has generalized and systematized this idea. But is the idea a new one? Surely not. What story is older than that of the young mother, speechless and heart-broken at hearing of her husband's tragic death, and of the old nurse who, saying, "She must weep or she will die," puts the baby in the mother's arms. Then the mother weeps and is saved. Her "pent-up emotion" is "discharged." The baby suggests to the mother an idea; something for which to live, and a means of "adjustment" to the tragic reality of life. Her emotion is "sublimated." Shakespeare,⁷ had the same thought about Macduff, who had just heard of the brutal murder of his wife and little ones:

. . . *The grief that does not speak,
Whispers the o'er fraught heart and bids it break.*

There is, then, nothing "new" in the effort of modern psycho-therapy, in similar hysterias, to discover a means of adjustment, a new point of view, so as to save the "o'er fraught heart" of the patient from breaking.

⁷ *Macbeth*, Act IV, sc. 3, l. 209.

Or take another case. When a girl suddenly becomes hysterical, a good mother will carry her to bed, bathe her arms and head, calm her brow by gentle petting, and give her milk to drink and make her rest. And she will not allow her to be excited or disturbed. Now, what is the "Weir-Mitchell rest cure" but this method systematized. It is, in general, rest in bed, milk diet, massage, hydro-therapy, seclusion from excitement, and enforced calm. So we see that there is really nothing "new" in it, save that it is a systematization and elaboration of what was known before. New methods of agriculture, education, advertising, are similarly only developments of ideas known to the ancient Greeks and Egyptians.

Mental exploration and psycho-analysis, notwithstanding the extravagant claims made by some on its behalf as something wholly "new," is only new in the same sense. It is only necessary to study ascetical works dealing with spiritual direction and giving advice to confessors to see that the Catholic Church contained in germ all these modes for studying minds that were sorrowful and sin-laden. Here is a penitent that shirks a grave duty, or gives way to uncontrolled paroxysms of passion. The enlightened spiritual director will seek to discover and point out the more or less hidden sources of such troubles, much as the modern neurologist will seek for the source of a phobia or hysterical symptom. There is, then, in a sense, nothing "new" under

the sun, certainly there is nothing totally new in modern psycho-therapy. But, after all, what does that matter? There is in the new methods this advantage, and it is of importance, that these new methods effect the cure of people who otherwise would not have been treated at all, nor cured.

As regards the proofs of the efficacy of the new psycho-therapy. Mathematical or metaphysical proofs cannot, of course, be given. At most one can point to striking sequences of events. There is a disease; methods "A," "B," and "C" are tried. The disease remains. Method "D" is tried. The disease disappears. We then attribute the cure to method "D." Such reasoning is not conclusive, of course. The disease may have run its course just when method "D" was applied, or the cure may be due to the delayed efficacy of method "A" or "B" or "C" or all together. One cannot have absolute certainty in such matters. Further, since "suggestion" enters into every method, "A," "B," "C," and "D," the recovery *may* be due to it. We cannot exclude this possibility. But, on the other hand, when we have innumerable examples of the sequence of events referred to, we have a right to form a probable opinion to the effect that the cure was due to method "D." Now let us take an example of a cure effected by Dr. W. H. R. Rivers⁸ of Cambridge University, whose ability and integrity as a scientist are beyond question, and who attributes this cure to psycho-analysis.

⁸ *Instinct and the Unconscious* (cf. Appendix).

To put the case briefly: A young doctor breaks down at the front finding in himself an appalling horror of trenches, dug-outs and all narrow spaces. It is a case of acute *claustrophobia*. He returns home and tries a rest cure which fails, and his phobia also defies all treatment by suggestion. Having read of psycho-analytic theories he searches in his mind for some incident in his past, even in his early life, which could account for his phobia, but fails to find anything. Analysis under Dr. Rivers then begins. Dreams are examined, association tests are tried, and finally a clue is found. Under hypnoidal questioning the clue is followed out, and an incident of boyhood is discovered which had been completely repressed and forgotten. The work of searching was now over, the "complex" or "unconscious motive" was found. As a boy living in a big city, he had gone into a little shop owned by a Jew off a laneway. Coming out he found himself in a narrow passage, the door of which had been closed. He was fiercely attacked by a dog. He was terribly frightened and upset. When rescued he was quite unnerved and trembling. This was the incident discovered. The patient, when awakened from hypnosis, had the story recalled to his mind. He refelt his old emotion of fear, and *relived the incident* in his imagination. *He felt at once that this was the origin of his claustrophobia.* From that day on, he no longer experienced any dread or fear of confined spaces. He was cured.

Such is an example of a "cure" worked by the

method with which we are dealing. Before his treatment by analysis the young doctor was a nervous wreck, suffering from an acute psycho-neurosis, and incapable of "carrying on" in life owing to his horror of any confined space. At the end of the treatment which, of course, lasted a considerable time — for searching into the mind is slow work — he was perfectly cured. The cure was certainly not due to the elimination of any physical factor such as sepsis, for there was none; nor was it due to drugs, massage or rest cure, for these remedies had failed. As regards *suggestion*, it certainly played a part in this cure, *as it plays a part in every cure of every kind of disease, physical and mental*. We cannot dismiss suggestion as a contributing cause or at least as an agent. The discovery of the "incident," due to the technique of the psycho-analytic method, afforded an opportunity for a very direct and potent suggestion. Was the cure due to this? We cannot tell with absolute certainty, but it is not unreasonable to regard the cure as due to the reliving of the rediscovered incident of early life, and so in a way "discharging" some pent-up feelings and emotions connected with it. In any case the sequence of events is striking. A sub-conscious factor (probably of the nature of a pent-up emotion) is discovered and relieved, and at once the psycho-neurosis is gone. A similar sequence is found in a multitude of reported cases, a fact which goes far to justify the pretensions of those who believe in the potency of "abreaction."

As regards the therapeutic efficacy of psychoanalysis, it is best, perhaps, to explain what the interaction of mind and body means in a neurosis and, secondly, what the activity and influence of sub-conscious motives mean.

First, as regards the interaction of mind and body, it will be helpful to consider how emotions and their physiological effects (as in anxiety-neurosis) are combined and interact. The external expressions of emotions are well known, but the physiological effects, both visceral and glandular, are less known, and few perhaps are aware of the vast amount of experimental work carried out on animals by Pawlow, Cannon, Elliott, Sherrington and others in this matter. It will be sufficient here to touch on the matter in a general way. Cannon has shown the opposing effects of the sthenic (strengthening), and depressing emotions along the antagonistic paths of the autonomic nervous system. "The sthenic emotions, such as joy, hope and confidence, steady the heart-beat, stimulate the secretion of saliva and gastric juice, and keep up the muscular tone of the alimentary canal and other organs. The depressing emotions, anxiety, fear, grief, rage and pain, produce rapidity of the heart-beat, and cessation of the secretion of saliva and gastric juice; they stop the movements of the alimentary canal and interfere with the normal functioning of other organs; they excite the sweat glands to secrete, and stimulate the secretion of the adrenal gland; the

secretion of the adrenal gland increases blood-pressure, and also gives rise to glycosuria. These are the ordinary physiological reactions of the emotions and are of the nature of reflexes.”⁹

On the other hand, it has been shown that visceral and endocrine disturbances excite the emotions¹⁰ to such an extent that an emotion may be regarded as an entity which can to all appearances be stimulated physically. The reactions, stirred up by physical means, tend in turn to excite emotion. It has been shown by Pawlow in his famous experiments on dogs,¹¹ that the emotional states become so associated with one another, through the mechanism of their genesis, that the awakening of one can produce the physiological results of the other, a fact that has to be borne in mind in the interpretation of some hysterical symptoms.

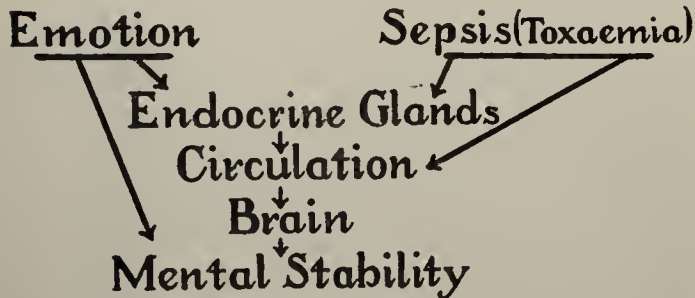
Now, as regards “*anxiety neurosis*” (the main mental symptoms of which are besetting fears and anxieties), mental stability is upset partly through emotion directly, and partly through the indirect

⁹ “Mechanism of Hysteria,” by E. Prideaux in *Functional Nerve Disease*, p. 56.

¹⁰ Cf. *Interdependence of the Sympathetic and Central Nervous Diseases*, by Orr & Row.

¹¹ If a dog is shown fresh meat, its stomach at once secretes gastric juice, and if the showing of the meat is sufficiently associated with the blowing of a whistle, or even with a painful electric shock, then the whistle or the shock will of itself suffice to excite the secretion. The war dogs attached to the French signal service were trained by exploding bombs close to them whilst they were being fed, so that they were able to associate terrifying noises with the pleasant idea of food.

action both of emotion and of some toxaemia, on the endocrine glands. These glands in turn act on the circulation and render its work of nourishing the brain less efficient. We may summarize these facts diagrammatically thus:¹²



An emotion such as fear, besides *directly* affecting mental stability, *indirectly* affects it, inasmuch as it causes hyper-thyroidism which lowers the vascular tension and so affects the brain through circulation. On the other (the physical side), a septic condition causes hypo-adrenia and so affects the brain by lowering the blood-pressure; or it might directly affect the circulation and cause arterio-sclerosis which, in turn, would upset mental stability. These facts are adduced in order to explain and emphasize, from the standpoint of the physiology of emotion, the close interaction of mind and matter in the production of neuroses. They also show the

¹² Cf. *Functional Nerve Disease*, p. 12.

necessity of taking all factors, both physical and psychical, into account in dealing with the neuroses. But they suggest a further question, with which we must now deal, the possibility of *unconscious* emotions producing these visceral and glandular effects and upsetting mental stability.

This is the second point which we have to explain in connection with the psycho-analytic method and, indeed, psycho-therapy in general. It is the real battle-ground between upholders and critics of the new methods, and hence we have frequently to refer to it. To quote Dr. H. Crichton Miller,¹³ "the function of psycho-analysis is to reveal to the individual from his own experience *the unconscious motive that is at work in producing his neuroses.*" We have already explained what is meant by this "unconscious motive" and have tried to show that it is in accord with facts of experience. We frequently find ourselves acting under an impulse that we are far from understanding, and fairly often we have to ask ourselves, "What made me do that?" "Why did I laugh to-night?" — Keats asks himself in one of his poems: Our hidden motives are such at times that "*we float upon a wild and violent sea, each way, and move.*" A gifted Irish poet, the late Patrick Pearse, oppressed by "the tears of things," writes: "The beauty of the world hath made me sad," but was his analysis of the cause of his sadness complete? Were there

¹³ *The New Psychology and the Parent*, p. 121.

not other unconscious factors, yearnings, " motives," at work? How is it that words spoken in dreams reveal at times a depth of yearning that is quite incomprehensible to the dreamer when told of it on awakening? What too, of the revelations made under hypnotic questioning, and in planchette writing? These considerations, combined with evidences already adduced,¹⁴ draw us forcibly to admit the hypothesis of the unconscious " motive " in psycho-neuroses. Such a factor would be all the stronger in neurotic and pathological cases. All men are not well-balanced, calm-minded, and accustomed to carefully introspecting and taking stock of their motives. Some there are, temperamentally unstable, who rush through life and experience emotional shocks of many kinds, feeling vaguely the surgings of strange passions, without pausing to think, or to study themselves. They forget much, and allow even weird and tragic experiences to escape their memories. Then they are struck down, and find themselves the victims of an obsession or hysterical symptom. The whole thing is a mystery to them. They have no notion what the cause of it is. Or, as in the case of war neurotics, they find their limbs paralyzed or they find themselves gripped by anxieties over which they have no control, and subjected to terrible nightmares, without any suspicion of the existence of mental phenomena behind these symptoms.

¹⁴ Cf. chapter on the " Sub-conscious."

And yet, behind the symptoms with which they are affected, and energizing them, in some strange way, there lie, according to the theory we are discussing, sub-conscious motives, working on and through the sympathetic nervous system and the endocrine glands.

To sum up the foregoing chapter: We have seen the need of cooperation in the nervous patient, the prerequisites in the neurologist, and the four essential elements of a good psycho-therapeutic method. We have discussed some criticisms of the new psycho-therapy and pointed out once more the significance of the interaction of mind and body, in the production of neuroses. Lastly, we have again touched upon the debated question of the "unconscious motive." We shall now consider in more detail the various methods of psycho-therapy.

CHAPTER XI

PSYCHO-ANALYSIS

THE modern phase of Psycho-analysis starts with lectures delivered by Sigismund Freud in 1895. Freud had studied under J. M. Charcot, the famous director of the Salpêtrière in Paris, where hysteria and other mental diseases were treated by hypnotism. Charcot had discovered that hysterical symptoms were connected with the ideas which prevailed in the patient's mind. Pierre Janet, one of his pupils, had cured a case of traumatic¹ hysteria by taking the patient in hypnosis back to the time when the shock was received and suggesting that the shock was harmless. At once all the painful hysterical symptoms disappeared. Meanwhile at Nancy, Bernheim and Liébault, and in Sweden, Watterstrand, were working along kindred lines.

From an old Viennese physician, Joseph Breuer, however, came the indirect inspiration from which psycho-analysis started. In the year 1880 Breuer had among his hysteria patients a young woman of twenty-one years. He detected, during her hyp-

¹ "Trauma" is a term applied to *mind-wounds* of various kinds by psycho-analysts.

notic talk, references to some painful experiences of early life, of which, in conscious moments, she had no recollection. He began to make to her, when awake, some illusions to the experience of which she had spoken when under hypnotism, and succeeded in eliciting from her, bit by bit, the whole story. "It showed that the scattered words were like the flag appearing above a wall behind which was marching a body of troops bearing it."²

When the whole story of the experience was brought back to the young woman's memory, and when she was able to repeat it, as she did, with appropriate emotional expression, health was restored. She had *re-lived* the experience and, so to speak, *worked off the pent-up emotion*. She had "talked it" out or off, and so the hidden trouble faded away naturally. In technical language, the experience was *abreacted*. The cure was effected, apparently, by bringing up from the sub-conscious into consciousness the circumstances of the *trauma* and the accompanying emotions. This method of treatment, still a central feature of psycho-analysis, came to be known as the *cathartic*³ method, or as psycho-catharsis. It differed from Janet's method in laying emphasis *on the finding and bringing to light of a hidden trouble of the sub-conscious*. Sigmund Freud, who worked at first with Breuer, now became the great pioneer and expounder of

² *The Psycho-Analytic Method*, by O. Pfister, p. 5.

³ Greek *καθαίρειν*, to purify.

psycho-analysis. He dispensed as far as possible with hypnotism and suggestion, and relying almost entirely on the manifestations of the sub-conscious, he added enormously to existing theory by his investigations. His first works on hysteria appeared in 1893 and 1895, being followed in 1900 and 1901 by his important works on *Dreams* and the *Psychopathology of Every-day Life*. He did not succeed in keeping his first followers together, or in winning a general acceptance of his views. Antagonistic schools of psycho-analysis swiftly came into being. Adler, Stekel, Jung and others struck out for themselves. In America, the new science found many supporters, of whom Dr. Smith Ely Jelliffe, and Dr. W. H. White were amongst the first. The war, with its "shell-shock" cases, afforded psycho-analysis an opportunity of winning the public interest and attention, and it availed itself to the full of the opportunity.

An immense psycho-analytic literature has now sprung into being, of which only a small portion is really scientific. Most of it is in the nature of "popularization," and has resulted in bringing discredit on psycho-analysis. This "popular" literature teems with unsavory theories of a materialistic and immoral kind. It sets itself expressly to illustrate man's brute instincts and perverse abnormalities from the region of sex, and it does not hesitate to present to the public, in a lewd and seductive way, aspects of human conduct which, if treated of,

should be reserved to works of a strictly technical and scientific nature.

This unfortunate state of things is largely due to the gross materialism of Freud himself, and of such of his supporters in America as A. A. Brill. They are avowed determinists. They see in religion only an expression of the sex-instinct. They reduce almost everything to sex, as though it were man's one and only instinct. For them there is no morality in the true sense; free self-expression, whatever form it may take, provided it be biological, is for them *good*. They have almost succeeded in tainting by their narrow and stupid theories the very useful instrument with which they worked, and which they helped to perfect. And so it is that the difficult task is laid on the shoulders of Christian psychologists of picking this good and useful instrument or method, psycho-analysis, out of a foul mire.

The psycho-analytic method reposes on certain apparently well-founded hypotheses, to most of which we have already referred. It is not inextricably bound up with these hypotheses, for, as we have seen, "mental exploration," which is its primary function, existed in one form or another throughout the ages. Socrates' "know thyself," and his theory of "intellectual midwifery" presupposed "mental exploration" sufficiently long ago, to say nothing of the many methods devised for the "examination of conscience" by Catholic ascetic

writers. But, in its most specific sense, psychoanalysis reposes on certain hypotheses concerning the unconscious. There is, first of all, the "*complex*" hypothesis, and all that it implies — namely, the "*repression*" of a painful experience into the "*unconscious*." "By repression, in this connection, is meant much more than a mere '*bottling-up*': nothing less, in fact, than the complete banishment of the complex to the Unconscious, that deep region of the mind which does not respond to our voluntary messages or commands. The chief significance, moreover, of the repression of a complex lies in the highly important fact that the Unconscious, as we have seen, is not a grave but a laboratory; not a storehouse but a mill. Repressed into the Unconscious, a complex does not cease to exist, nor does it become inert, rather, it is continually striving to return to consciousness, and to exercise that influence and power which it enjoyed before its repression and which, in fact, was responsible for its repression."⁴ A further hypothesis is that of the "censor" representing, figuratively, something in the nature of an unconscious will akin, as we have seen, to the conception of St. Augustine.⁵

May we or may we not, as scholastics, accept all these hypotheses? Has the hypothesis of the unconscious, as Reverend Cyril Hudson (in his very

⁴ *Recent Psychology and the Christian Religion*, by Rev. Cyril A. Hudson, M.A. (Allen & Unwin, London, 1923).

⁵ Cf. Chapter on "Sub-conscious."

able and level-headed book from which we have just quoted) says, "proved superior to any other that has been suggested."⁶ Is it in accord with the general trend of Scholastic Psychology? We have already answered these questions in the affirmative, and given our reasons. But, once more, let us make this reservation: that we do not at all accept the various extravagant hypotheses, especially those connected with the so-called "censor." Nor do we accept, of course, the determinism that is introduced by Freud himself and others. To quote, for instance, from a Freudian, apropos of unconscious motives: "Too much emphasis cannot be placed on the fact that the real causes of what we do in our acts from hour to hour are hidden from us, and that the majority of assigned reasons are mere pretexts, the real motives being in the unconscious, and therefore absolutely inaccessible to us."⁷

This is a characteristic example of the slovenly thinking of "popularizers" of psycho-analysis. It is at once illogical and dogmatic. On the basis of some instances of abnormal psychology, such, for example, as post-hypnotic suggestion, where the subject aroused from hypnotism fulfils tasks without realizing that he is still under suggestion, a rash generalization, utterly opposed to the common sense of mankind, is made. It is true to say that we often

⁶ *Op. cit.*, p. 14.

⁷ *Man's Unconscious Conflict*, by W. Lay, p. 16.

act without defining precisely our motives, and often too we act under influences of which we are more or less unaware, but in deliberate choices and decisions our real motives are substantially present to us. It is a gratuitous statement, utterly opposed to experience, to say that "the real causes of what we do in our acts from hour to hour are hidden from us and . . . absolutely inaccessible to us." If that were so, there would be no such thing as morality or responsibility.

It is not necessary here to dwell on Freud's theory of the *libido*, or on the one-sided and narrow views of Freudians regarding the primitive instincts, in particular the sex-instinct. These theories, which are materialistic and based on the conception that man is a mere animal, unendowed with a spiritual, substantial soul, and incapable of acting freely, have no logical nexus with psycho-analysis as a method. Indeed it is hard to see how this method can be made to fit such theories, or how it can be made a vehicle for exploiting them. Fortunately, most reputable psycho-analysts have rejected them with contempt, and apply the method from the orthodox standpoint. Freudians have succeeded in covering themselves with ridicule in their vain efforts to explain every human activity, whether normal or abnormal, as a manifestation of sex, to the almost total exclusion of other instincts which are just as real and just as imperious.

Having indicated the hypotheses on which the

psycho-analytic method rests, it may be well now to quote some definitions of *psycho-analysis*. Oskar Pfister⁸ defines psycho-analysis as follows: "Psycho-analysis is a scientifically grounded method devoted to neurotic and mentally deranged persons, as well as to normal individuals, which seeks by the collection and interpretation of associations, with the avoidance of suggestion and hypnosis, to investigate and influence the instinctive forces and content of mental life lying below the threshold of consciousness."

This definition is faulty in two respects. Firstly, suggestion and hypnotism are not outside the psycho-analytic method. Secondly, the method does not deal exclusively or even mainly with the subconscious.

Ernest Jones,⁹ too, over-emphasizes this aspect of psycho-analysis, giving as its aim "the setting free of the unconscious with a view to the discovery and comprehension of the patient's buried complexes." Barbara Low¹⁰ similarly puts its aim as the "investigating of the content and working of the unconscious mind and the relations between the conscious and the unconscious." Professor Brown¹¹ gives a better account of the matter: "The word Psycho-Analysis connotes both a method and a theory. As

⁸ *The Psycho-Analytic Method*, by Oskar Pfister.

⁹ Cf. *Papers on Psycho-Analysis*, p. 131.

¹⁰ *Psycho-Analysis*, p. 24.

¹¹ *Suggestion and Mental Analysis* (Univ. of London Press, 1922), p. 22.

a *method* it is a method of free association, of bringing back early memories, early phantasies, and early mental tendencies, by getting the patient to fall into a state of reverie with the critical sense in abeyance and to allow ideas to come up from the unconscious." Lastly, the practical purpose of psycho-analysis is well brought out by Tridon¹² when he writes: "Psycho-analysis is not interested in mental states as such; it aims at tracing their origin and at bringing about their removal when they prove harmful to the individual. It seeks to direct into useful channels mental activities which are a dangerous or wasteful display of energy. It searches the unconscious, not for literary illustrations and similes, but for positive, scientific, practical information concerning the operations of the mind."

The technique of the psycho-analytic method embraces the examination of dreams, the process of free-association, the production of "abreaction," and the inducing of "transference," as well as the ordinary, common-sense methods of exploring the mind by questioning and studying the external manifestation of thoughts, emotions, etc.

As we shall presently treat of dreams and their interpretation, we omit all reference to them here, contenting ourselves with saying that this item is an important one in psycho-analytic technique. Free-association in its simplest form consists in

¹² *Psycho-Analysis*, by André Tridon (Kegan Paul, London, 1919), p. 18.

reading out, one by one, at due intervals, words on the hearing of which the patient must frankly tell what thoughts or images they suggest to his mind. The reaction-time should be noted. And it often happens that delay on the part of the patient in finding or recording an "association" is indicative of the presence of a "complex" connected with the word just heard. The method of free-association is helpful in giving an insight into the character and psychology of the patient. In this connection "crystal-gazing" by the patient is sometimes used, the images he sees in the crystal being regarded as a reflection, as it were, of the imagery of his own mind.

We have already referred more than once to the nature of "abreaction," and it is not necessary to dwell further upon it. The securing of a "transference" is an important item in the psycho-analytic method. In general it means the gaining of a suitable attitude of confidence on the part of the patient towards the neurologist. But at times it means much more than this. Let us quote Freud himself on this matter.¹³ "If the patient has to fight out the normal conflict with the resistances which we have discovered in him in the course of the analysis, he is in need of a powerful motive force to influence the decision in the sense, desired by us, leading to recovery. Otherwise it could happen that he might decide for a repetition of the

¹³ *Vorlesungen zur Einführung in die Psychoanalyse*, 1918, p. 522.

previous result, and let that which has been raised into consciousness slip back again into a state of repression. The deciding factor in the fight is, then, not his intellectual insight — which is neither strong enough, nor free enough for such a function — but solely his relation to the physician. So far as his *transference* is of a positive nature it clothes the physician with authority and transforms itself into faith in his statements and views. Without such *transference*, or if the transference is negative, he would not for a moment let the physician and his arguments come to a hearing.

But this transference becomes at times emotional and, to use Professor Brown's words,¹⁴ "akin to love." From this source as we have pointed out comes the moral danger of psycho-analysis. And clearly, where there is difference of sex, and where a young woman feels the effects of this "transference," there should be precautions, such as those indicated by the Church in the matter of hypnotism. Further, it must be remembered that the danger is one that endures for a considerable time, as the psycho-analytic treatment is often of long duration. "Even in the hands of the great masters of Psycho-Analysis the shortest cases take an hour a day for three months, and some take an hour a day for three years."¹⁵ When one considers what this means, in the light of what we have said about the intimate

¹⁴ *Op. cit.*, p. 35.

¹⁵ *The Mind and its Disorders*, by W. H. Stoddart, p. 183.

nature of the confidences exchanged between physician and patient, in daily *tête-à-têtes* lasting an hour, many of them passed in discussing the aberrations of the patient's *libido*, we cannot shut our eyes to the existence of moral danger when there is difference of sex between patient and physician.¹⁶

Nevertheless, it is all-important to secure, within proper limits, a transference such as that described above. Without it the patient will not be enabled to cooperate as he should, nor will it be possible for him to obey "the golden rule" which at times is most difficult, and which is thus formulated by Ernest Jones:¹⁷ "*that in no case is the patient ever to withhold from the analyst any thought however painful or delicate.*" This rule may seem at first sight to be almost immoral. But when it is remembered that there is question of the health and perhaps the life of the patient, and the saving him from insanity, it will be seen that it is justifiable. A doctor has a right to insist on his patient's telling him every symptom and showing him every sore. A lawyer too must have the full truth from the lips of the criminal whose defense he undertakes.

Having pointed out the principles upon which the psycho-analytic method reposes, and having briefly described its technique, it is time for us to consider some of its limitations as a method of psycho-therapy.

¹⁶ Readers are referred to the concluding pages in the chapter on "Hypnotism" for guidance as to the avoiding of such dangers.

¹⁷ *Papers on Psycho-Analysis*, p. 284.

We first meet with the objection which will occur at once to the minds of Christians. What if the "mental exploration" discovers as the source of the neurosis *a moral weakness*, let us say a vice like drunkenness? What can psycho-analysis do to effect a cure? How can it find a substitute for God's supernatural grace? How can it infuse strength into the human will to help it to resist sin?

Now, no matter what psycho-analysts say to the contrary, this is a just and profound objection to the pretensions of this purely natural method. In its own way, within its own limits, it may be good and helpful, but it cannot dispense with the grace of God. And, unfortunately, only too often neuroses and psycho-neuroses are due directly or indirectly to depravity of heart. This depravity can only be cured by God's help. The practice of religion, the use of the sacraments will change the heart and give strength to the will to resist temptation, and by such means alone can the help be won. Neither "suggestion" nor "abreaction" can succeed in such cases; at most they may lead to a temporary cessation of the practice of vice. They cannot change the heart, nor help the will to submit to the law of God.

Again, while we admit the natural soothing effect of the unburdening of the secrets of the heart to another, especially when the other is wise and sympathetic, we must emphatically point out the infinite difference between such kind of "lay confession,"

and the true sacramental confession, in which not only is the heart unburdened but *the sins are forgiven and blotted out forever*, and the conscience is truly relieved, and filled with a deep, sweet, supernatural peace. The one form of confession is only a shadow, little more than a helpful imitation, the other is the true substantial thing. In one case man intervenes to console, in the other God intervenes and perfects the soul once more. There is another very patent limitation to the efficacy of the psycho-analytic method which must be pointed out. It concerns the part of the constructive work, of psychical reeducation, called "*sublimation*."

For Freud the basal instincts of man are the primitive brute instincts, inherited from our supposed pre-historic savage ancestors which, untamed, and violent, still exist as cave-dwellers in our unconscious. Freud selects, as we have seen, one instinct as predominant and fundamental, and calls it *libido*, emphasizing its sexual character. Putman and others call it "*craving*"; Jung calls it "*horme*"; Bergson's *élan vital* is a somewhat similar conception. It connotes that desire of or craving for well-being, love and freedom of action with which modern psychologists deal so largely.

The primitive instincts are, according to Freud, essentially anti-social and egotistic. They possess energy which seeks realization in a pleasurable outlet. They resist restraint and repression, and are ultimately the source of all mental conflicts and

neuroses. In early life these instincts are unchecked and dominate us. But as we grow, and meet reality, and have to conform to conventions, the *libido* has to be checked and repressed, or if possible *sublimated*; that is, made to flow into useful channels. The young male, for instance, has an aggressive fighting instinct, which in due time has to be repressed.

It still lives in his unconscious, seeking an outlet to discharge its energy. Later on, when he plays games and takes his place in the battle of life, he finds the means of discharging the energy of his primitive fighting instinct. He finds a sublimation for it in a useful channel. Had he not found such an outlet it might have caused a neurosis, for such instincts cannot be effectually "bottled up" for long; unless they are sublimated, they break away and occasion a perversion or abnormality of some kind; sometimes they translate themselves into hysterical symptoms.

Such is a very brief outline of the Freudian doctrine of the instinctive forces, and their part in the causation of mental disequilibrium.

Without entering into a criticism of this or other similar theories, let us take up the central fact, the need of *sublimation of instincts*. There is no difficulty in admitting the existence of such a need, for it is, in other words, the work of education, especially of moral education.

Now, to the Christian mind such sublimation is

impossible without the grace of God. How can, for instance, the strong sex-proclivities of men and women be turned in an orderly way into other useful channels, such as humanitarian work, or literary and artistic work, unless the will be strengthened by God's grace to control the sublimation? Here again the natural method must yield place to the operation of religion.

If the foregoing limitations of the psycho-analytic method are borne in mind, we have no difficulty in conceding its value and importance as a natural aid in psycho-therapy. As a method it fulfils a great need. A patient suffering from strange obsessions comes to you for help. You listen to his story. Your first impulse is to start giving advice without fully knowing his character or mentality. Psycho-analysis teaches you many a lesson and offers you a splendidly conceived technique for investigating thoroughly the patient's mind, and for discovering, as far as it is humanly possible, the source of his trouble, its origin, its course, and its connections with the facts of his life history. In fine it puts you in a position, if you faithfully follow out its technique, to give the best advice possible.

In conclusion there is much to the credit of psycho-analysis. Firstly, it is of itself of great utility in dealing with all those forms of nerve trouble in which the natural and supernatural do not clash, in which the origins of the neurosis are not due to depravity of heart, and where there is no sublima-

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tion necessary of the kind that demands a change in moral conduct. Even in cases where moral conduct is involved, psycho-analysis, in the hands of a good Catholic neurologist, can be made to work in perfect harmony with religion. It can even be used at one and the same time as an instrument of psycho-therapy and an engine of religion. As a method it is *per se* perfectly legitimate, and even where *per accidens* it would be dangerous or inexpedient, its employment can be rendered quite lawful by wise precautions.

In the second place, psycho-analysis has brought about the analysis and classification of sex-phenomena, and has laid the foundations for a science of sex. Such a science was necessary for those engaged in the study of criminology and pathology. And it satisfies a want felt by such clergymen, educators and lawyers who are brought into close touch with unfortunate people suffering from sex-perversions.

In the third place psycho-analysis helps patients suffering from mental trouble to understand themselves better. It gives them such hope and confidence as springs from self-knowledge, or to use Professor Brown's words, "*auto-gnosis*."¹⁸ "In the course of mental analysis, the patient obtains a more and more objective view of the past course of his mental life. He learns to understand himself better. He understands more clearly in what respects he

¹⁸ *Suggestion and Mental Analysis*, by Prof. W. Brown, p. 39.

perhaps

has failed in the past to adjust himself adequately to the demands of life and to the peculiarities of his own nature. . . . This process of intellectualization of the mind, whereby the patient gains an unbiased view of his own life and an ever-deepening insight into its true nature, is one of the most important factors of cure in the course of mental analysis."

CHAPTER XII

AUTO-SUGGESTION

THE theory of Emile Coué has provoked of late much thought and discussion. Its simplicity and unlimited adaptability, combined with its inexpensiveness, has contributed to its popularity. The well-known formula, "Day by day, in every way, I grow better and better," which is its kernel, has become for some an inspiration, while for others, scoffers by nature, a source of endless fun. Meanwhile, Emile Coué has been hailed by many as a prophet and a wonder-worker. Men say that he has opened the gates of a terrestrial paradise wherefrom pain, sickness, worry and "life's created burdens," "the former things" of the old world, are banished. His teachings are spreading out into the domains of education and social science. His influence radiates far afield from Nancy, and by some it is asserted that his name will live forever, and that his place among gods is secure.

The claims made by enthusiasts on behalf of the Coué method are stupendous. It is said that ninety per cent of the patients that pass through his hands at Nancy are cured or greatly benefited. No type

of disease withstands his healing system. Organic trouble and functional trouble alike are said to yield to suggestion. The paralyzed use again their dead limbs, consumptives regain their strength, ulcers are healed, partial blindness, deafness and dumbness, together with all kinds of nervous disorders, mental or physical, are cured. And yet the wonder-worker himself disclaims any credit. "I have never cured anyone," he says. "My patients cure themselves. I show them how to do so, *voilà tout*." "Denial of the dignity of disease is one of the characteristics of Coué's clinic," writes Charles Baudouin.¹ "No homage is paid to it as a dread monarch. It is gently ridiculed. Its terrors are made to appear second-rate and its victims end by laughing at it." In fine, even unsympathetic scientists are forced by facts to admit that there is "something in it," although, needless to say, they discount to a very great extent the extravagant claims put forward by Emile Coué's followers.

Though the method of Emile Coué is already well known, it may be well to describe it briefly. It is simple in the extreme. The patient, no matter what his complaint may be, is taught to *suggest* to himself that he is improving and getting cured. This suggestion takes the form already quoted: "*Day by day, in every way, I grow better and better*." The formula may of course be adapted to

¹ *Suggestion and Auto-Suggestion*, by Charles Baudouin, p. 79.

special circumstances, and particularized so as to apply directly to certain ailments or disabilities, whether physical or mental. The formula is to be repeated many times over, when the mind is blank, or rather when attention is not held or occupied. Drowsy moments before or after sleep; occasions when one is quite relaxed, and when the senses are lulled, and the mind at ease, are best. At such moments entrance into the "unconscious" is supposed to be easiest — the aim of the method is to win admittance for the suggestion into the "unconscious." The idea contained in the formula, of growing improvement, will, when assimilated by the unconscious mind, gradually work out the cure through organic agencies. Such is in brief the theory and practice of Coué, which has held sway in the "New Nancy School" since 1910.

The central point to discuss, amid all the hurly-burly of fancy, theory and superficial psychology which circles around the term *auto-suggestion*, now heavily laden with various meanings, is the time-honored problem of the influence of mind on matter. How far can the mind control the physical functions of the body? In what manner does it exercise its control? Modern psychology has gathered a rich harvest of illustrations of mind-influence from the fields of abnormal psychology. There is nothing whatever new in the doctrine that men are very suggestible. We imitate consciously and unconsciously in a thousand ways. Environment, and

all that makes up environment, whether physical or psychical, influences us enormously both physically and mentally. It is nothing new to say that we *suggest* ourselves into and out of various maladies. Nor in that aspect of auto-suggestion which emphasizes the motive force of images, sentiments and ideas, is there anything new. Half a century ago the impulse-power of images and thoughts had been very fully dealt with. As regards the facts and instances adduced in explanation and support of the new theory, it would be difficult to find anything not previously fully recorded and carefully analyzed. The idea even of curing by systematic suggestioning is very old, and systems perhaps more worthy of adoption than that of M. Coué have been devised, although they have failed to attract public attention.² Indeed, in spite of the extravagant claims made on behalf of M. Coué by his commentators,³ his chief merit, apart of course from his practical work, is the fact that he emphasizes once more the part that suggestion plays in life, bringing out its therapeutic bearings, and offers a simple and, for some, a helpful method of calling into play the latent recuperative resources of our nature.

² Cf. *Le Gouvernement de Soi-même*, by Antonin Eymieu, S.J., *Première Série* (Perrin et Cie., Paris, 1905). Also *Will-Power*, by R. J. Ebbard (The Modern Medical Publishing Company, 1902), wherein an almost identical system of suggesting by formulae is to be found (pp. 133, 232).

³ Cf. *The Practice of Auto-Suggestion*, by C. Harry Brooks (Allen & Unwin, 1922). *Suggestion and Auto-Suggestion*, by C. Baudouin (Allen & Unwin, 1922).

The word *suggestion* has come to have a rather technical meaning in the New Nancy School. Binet's definition, "a moral pressure exercised by one person over another," has been rejected, and emphasis is laid on the assimilation of the idea by the unconscious mind. If I happen to mention casually to a friend that a certain book is very interesting, I am not exercising a moral pressure of any kind, and yet it may be that the idea I have, so to say, thrown into my friend's mind may be assimilated quite unconsciously, and he may procure the book and read it. This is a typical instance of suggestion in the strict sense. It is not hetero-suggestion according to the Nancy School. True, the idea comes from me, but it enters my friend's mind, makes a part of it, is assimilated by it as his own. In this assimilation which leads to action *suggestion* consists — and it is always auto-suggestion, self-suggestion. "All suggestion," says Baudouin, "is auto-suggestion." It is a putting into operation of the ideo-reflex power which exists in us all. It is intra-individual, not inter-individual. It is not subjection to or submission to the will of another. It is the assimilation and transformation of an idea into an act, through sub-conscious agencies. Such is the manner in which *suggestion* is explained in the new school.

The psychological theory on which auto-suggestion is based is thus formulated. "The thought we think determines not only our mental states, our

sentiments and emotions, but the delicate actions and adjustments of our physical bodies.”⁴ This principle is much more clearly and accurately formulated by Father Eymieu in *Le Gouvernement de Soi-même*, wherein he treats very fully of idea-force:

“The idea inclines to the act of which it is the representation.” “Every idea, in consciousness, tends to provoke an act. The influence of ideas introduced into consciousness lasts until such ideas have been effaced by a stronger idea. The idea develops not only by an inward evolution toward the corresponding act, but also by an association with the ideas and the connected phenomena toward an ordered whole. . . .”⁵

Father Eymieu treats of self-suggested maladies and cures, and shows how an idea (in the wide sense) or an image may be regarded as the commencement of the act. His explanation or analysis of this phenomenon is worth recording. Distinguishing between spiritual knowledge and knowledge of the senses, he points out that the former type of knowledge corresponds to the free will, while the latter type corresponds to blind and inevitable impulse. As, however, sensation or sense knowledge always accompanies spiritual knowledge, there is in every idea the element of an involuntary or necessary impulse (*appétit fatal*). It is on ac-

⁴ *The Practice of Auto-Suggestion*, p. 57.

⁵ *Le Gouvernement de Soi-même*, p. 65.

count of this sense-impulse that every idea tends to produce the act it represents, and in the measure in which it is associated with sense knowledge it is efficacious in producing automatically the act.

The idea, therefore, will be efficacious in the degree to which it mixes with sensations. In other words, the more an idea is going to make itself sensible—or, if I may be permitted to use the word—incarnate, the more the final act will be made easy or even fatal, the more the idea will be efficacious.⁶

The idea then tends to give rise to the act. But, in moral matters, the act gives rise to the sentiment of which it is the expression. If then we are anxious to have certain sentiments, for instance, courage and cheerfulness, we have an obvious way of awakening them within us. We must *act as if* we already had the sentiments in question, “by dint of weeping, groaning, crying as if they felt a great sorrow, they conclude by feeling it.”⁷ When patients come to Coué and complain of depression, he proposes as a remedy to say to themselves, again and again, at appropriate times, “I am feeling more and more cheerful, more and more courageous,” etc. Father Eymieu seems to improve on this in recommending them “*to act as if* they were cheerful, courageous,” etc. Coué depends on the awakening of the idea in the mind, and the assimilation by the unconscious of the idea. Father Eymieu,

⁶ *Ibid.*, p. 94.

⁷ *Le Gouvernement de Soi-même*, p. 184.

basing himself on every-day observation, recommends the thorough simulation, physically and mentally, of the desired state—and he claims that when properly employed he has not known his method to fail.⁸

There are many obvious instances of mind-influence on the organism in which “suggestion” seems to play a part—if suggestion is the right word to apply to the *psychical* part of the phenomenon.⁹ “Suggestion is not everything,” says Bernheim, “but in everything there is an element of suggestion.” Let us take the time-worn plank-walking instance, to begin with. To walk a thirty-foot plank nine inches wide, were it to lie on the ground, would be an easy matter, but were it to bridge a chasm it would be virtually impossible for the ordinary man. In the latter case, fear, an emotion, is aroused, and the idea or image of falling follows. This idea of a movement gives birth to the movement. The fear of falling has now evolved into a movement towards falling. The intense emotional accompaniment gives all the more strength to this movement, and finally the mind is wholly absorbed, fascinated by and obsessed with the idea of falling; the will is, so to speak, demobilized, and one falls. Moral falls

⁸ *Ibid.*, p. 215. It should be noted that Father Eymieu is primarily concerned with disorders of a moral nature, not with bodily ailments. His method, however, is applicable in great part to the latter.

⁹ Such phenomena have a physical (or physiological) part as well as a psychical part. For the moment we are only dealing with the latter.

are often analogous. "The emotion shock disassociates conscience and even inclines to the act we fear, according to the greatness of the emotion-shock and the emotionalism of the subject."¹⁰ Moral theologians have recognized the possibility of passion's depriving one of the power of free-choice. And it may well be that the every-day verdict in suicide cases, "while temporarily insane," is merely a way of expressing what common sense justly takes into consideration—namely, the psychology of the irresistible force of emotional ideas under circumstances such as are described above.

Distractibility, fascination, and "infatuation," are very common phenomena. One may easily become fascinated by a glaring light, a rattling window, a worrying thought or a recurring pain. Once attention is caught and held, to the exclusion of other things, one is fascinated. We may be anxious to read, but if a barrel-organ in the street absorbs our attention, we must throw down our book. An obsession of such a kind engenders an "impossibility." Suggestion lies at the root of the phenomenon. The thought, "I cannot read while that noise continues," becomes assimilated mentally. We make a law for ourselves by such suggestioning. *Direct* efforts of the will are useless; they only intensify the attention given to the noise and strengthen the impossibility. Against obsession or "infatuation" of this kind, indirect means

¹⁰ Eymieu, *ibid.*, p. 122.

alone succeed. Fault has been found with Coué for stating that "where the imagination and the will are in conflict, the imagination invariably gains the day." And yet in the sense in which he says it (he is referring to such phenomena as fixed ideas and obsessions), his statement is an old and admitted truth. The term which he uses, "imagination," is not the most appropriate term, nor is his law formulated accurately, but truth underlies his statement. When attention and feeling are held by a pain, *direct* volition is powerless to overcome such a combination. The will may, however, succeed by the indirect means of turning the attention to something else. Spiritual writers advise such "indirect" methods in the case of attention being caught and held by seductive thoughts. It would be vain for the will to struggle directly with "imagination" aflame with passion. Soon the whole attention would be so held, absorbed and fascinated, if it were allowed freely to dwell on the seductive thought, that the idea or image-force would become irresistible. Father Eymieu well points out that the image or idea can become so richly emotional as to lead inevitably to the act. The will has the duty of controlling the attention, and of not allowing it to become obsessed and infatuated in such matters. It is the part of the will to decline such hopeless encounters—direct efforts of the will only serve to increase the obsession—for as Coué justly says, "in the conflict between the will and the 'imagina-

tion ' the force of the ' imagination ' is in direct ratio to the square of the will."

Coué wisely warns people not to strain or use *effort* in inducing suggestion. The idea to be introduced into the sub-conscious should be allowed to enter easily, freely, not driven in. The mind does not assimilate ideas and form association-complexes under threat from the will. A kind of mental evolution has to take place in suggestion and this happens in accordance with the nature and laws of the mind which are not in this matter controlled by the will. Hence one can quite understand Coué's point of view in one of his answers to patients: " Monsieur, you have been making efforts. You must put trust in the imagination, not in the will. Think you are better and you will become so."

The unnoticed unconscious influence of an idea¹¹ on the body is well shown in Cumberlandism, in the experiments with Chevreul's pendulum and, indeed, by Coué's hand-clasping exercise. An adaptation of the Chevreul pendulum, a key swinging on a cord from a rod, will illustrate the matter. I chalk a white circle on a table, and hold the rod with the key-pendulum hanging over the centre of the circle. Then I look round and round the circle, thinking and imagining that the key will swing round and round the circle, but at the same time *I do not move my hand consciously*. Soon the key

¹¹ We use "idea" in the wide sense of a conception *plus* its sensible concomitant imagery, etc.

will begin a slowly-increasing orbit, and finally will freely swing round the chalked circle. Here again is an instance of idea-force, the idea inclining (unconsciously) to the act, the image being the unconscious commencement of the act. Instances of a like kind abound. A snap-shot taken of a jumping competition will reveal the legs of some of the on-lookers in the air as though they too were jumping. A blush, a yawn, a laugh, or a sneeze may have not uninteresting consequences through the force of imitation and suggestion.

The significance of the relations between the physical, the physiological and the psychical is at times lost sight of. There is nothing very noteworthy at first sight in the fact that a well-directed uppercut will knock a man down, because the discharge of a physical force must have physical consequences. But there are also other consequences of a less markedly physical order, the nature of which it is not so easy to explain. There is the sudden innervation of several muscles. There is a dramatic change in the complicated vascular system. Physiological phenomena of a most complex nature follow at once—some secretions are inhibited, some are facilitated. Then through the shaken central nervous system several kinds of psychical phenomena are brought about. Many volumes would hardly suffice to give a full account of the effects of such a knock down blow. But in this instance we are only considering the results of a

physical stimulus. No less wonderful results follow from a *psychical* stimulus — let us suppose from a sudden jealous thought. The jealous thought, with its emotional accompaniment, will almost instantaneously and unconsciously bring about those external physical expressions of the sentiment or passion that litterateurs and artists paint. The bodily members change in position. Muscles are extended and contracted. Physiological changes occur simultaneously. The vascular system, the secretions, the nervous discharges, the quickened respiration with resultant increase of blood pressure, all show effects of the stimulus, and all these multifarious phenomena will follow almost instantaneously and unconsciously.

An image or a memory may cause one to vomit, or to faint. Shock, even of a psychical kind, may so strain the valves or arteries that death may ensue. A bursting shell has so terrified people who for years believed themselves paralyzed that they have fled for safety, using their limbs once more. Intense emotion has accounted for startling phenomena of dermatography or skin-impressions; and it is stated in modern scientific books that warts can be caused by such simple means as putting a damp finger on the spot where the wart is wanted, while looking at the stars.¹² Considerations of this kind cannot but serve to emphasize the widespread power

¹² Cf. *Suggestion and Auto-Suggestion*, by C. Baudouin, for other curious examples of this kind.

that the mind has over the body and the body over the mind. Emile Coué has done a service in illustrating these old-time truths. "My friend," he said to a blacksmith, who for ten years had not been able to raise his hand above his shoulder, "you have been saying to yourself all these years, 'I cannot raise my hand, I cannot raise my hand,' and so you paralyzed your arm. Now say with me, 'I can raise my hand, I can raise my hand'—now raise it!" And the blacksmith to his delight raised his hand high above his head. But are such cures permanent? Well, in a sense, yes, and in a sense no. The blacksmith, the very next day, might again have suggested himself into his paralysis by allowing himself to believe that he could not raise his hand. But on the contrary, he could retain his new-won power by keeping alive his belief that his arm was cured. Emile Coué has cleverly indicated the origin of many maladies. The stammerer tells himself that he is going to stammer, that he cannot speak without stammering, and he stammers. If he told himself that he was going to speak calmly, that he could and would speak calmly, and if by so telling himself he awakened the conviction that he was all right again, he would stammer no more. The Nancy School claim such cures and say that they are of daily occurrence in the Coué clinic.

Interesting sidelights are thrown on our ways of thinking and speaking by looking at life from the standpoint of suggestion. If it is true that we do

suggest ourselves into pains and worries and difficulties, then we should never say and think like the tiro-cyclist in face of a gate-post, "I'm running into it. I can't avoid it." We should say and think, "I'm going safely by it. I'm past it already." We shouldn't say, "I'm losing my memory"; "I'm feeling depressed"; "I'm sick of life"; "I've a dreadful tooth-ache"; "I'm suffering from insomnia," or any such things. We should either with Coué *say and believe*, or with Eymieu "*act as if*" we were bright and gay, without pain, good sleepers, accurate of memory, etc. And why? Well, the sub-conscious may hold the key to the secret — we can do little more than proceed to make reasoned guesses as to what the secret is.

This powerful influence exercised by mind over body is what one who accepts the scholastic theory of man's nature should expect. Man is one, but his nature is composite, it is both spiritual and material. Man is not spirit or matter, but matter united to a spirit which unifies, perfects, vitalizes, completes and "informs" it. The soul of man is imperfect apart from his body; it is created to "inform" his body. Man is body and soul, united; a rational animal; a spiritualized substance. The body influences the mind; the mind cannot operate without the body. The soul influences the body; for the body is lifeless, inert, and falls into decay without the soul. Hence it is that any facts which illustrate the dual but unified nature of man are

in perfect harmony with Catholic philosophy, rendering it "increasingly more difficult for a biologist to be a pure materialist."¹³

But the question still remains, How does the mind influence the body? How can an idea lead to a cure? Biologists and physiologists have as yet advanced no satisfactory theory; nevertheless, it seems to the present writer that the direction in which the answer is to be found can be indicated.

Readers will no doubt recall to mind those strange and wonderful phenomena of regeneration and recuperation of which the lower forms of animal life are capable. Protozoa and many forms of metazoa are capable of budding out almost any lost part; indeed, in some cases, if cut into bits, each bit will become a whole animal. A part of the branchial apparatus of the Ascidian, *Clavellina*, if cut off, will become a complete *Clavellina*. A salamander's leg may be cut off six times in succession, and each time it will grow again. No doubt in higher forms of animal life this power of regeneration is much less marked. But nevertheless, even in man it is considerable, and processes of regeneration are constantly taking place under our eyes, and have been many times experienced since the first time we cut a finger or broke a bone.

This power of regeneration has to do with the blood system primarily, for the blood carries the

¹³ *The Beacon*, Jan., 1922, Mr. Julian Huxley. Quotation used by Father Elrington, O.P., in *Universe*, April 13th, in a very able review of Baudouin's book on Suggestion.

hormones through the body. But the blood or vascular system is in turn controlled by the sympathetic nervous system, and here we come into close contact with the psychical.

Approaching the problem from another point of view, we must ask pardon for dwelling again on what are called "conditioned reflexes." If a plate of meat is shown to a dog, its mouth secretes saliva. This secretion is a reflex; the condition is the sight or smell of the meat. Now, if for some days, a bell is rung when the plate of meat is presented to the dog, the bell also begins to condition the reflex. And after a time, the ringing of the bell, without the presentation of the meal, will be sufficient to cause the secretion of saliva. Here the sound of the bell is the condition. But we may go some steps further. We may introduce a new stimulus which will inhibit the secretion, and we may add still another stimulus which will inhibit the inhibition of the secretion, so that the saliva flows. Further, as was done in a physiological laboratory in St. Petersburg, a painful stimulus, a strong electric current, may be made the condition for the secretion of the saliva, just as the sound of the bell was. In other words, pain, and fairly severe pain, may be utilized as a condition for a pleasure-reflex.

But, it may be asked, how does the "conditioned reflex" enter into the explanation of auto-suggestion? of healing by an idea? Well, let us suppose that the regenerative or recuperative powers of the

body act in some way as reflexes. What then can condition their activity? It may very well be something psychical. For we have seen in the case of the dog that various psychical phenomena can provoke or condition reflexes. Or again, the suggested idea may provoke one reflex, and it in turn may be the condition of the second or recuperative reflex. Or again, recuperative powers may be set free to do healing work by the inhibition of some noxious reflexes. At least it may be confidently asserted that conditioned reflexes illustrate physiologically the methods of curing pain to which Coué lays claim. But it must be confessed that the *modus operandi* whereby the thought and belief that "I am getting well and strong" heals an ulcer is still mysterious in the extreme, even though we call into play the sympathetic nervous system and its influence on blood supply.

There is no doubt that suggestion plays a far greater part in life than many people realize. On this fact the whole art of advertising rests. A mustard or a motor-car are so obtruded on the eyes and ears by advertising, and so glaringly and sensationally praised, that the thought of their special value is at length aroused. Patent medicines have effected thousands of cures, though often their only merit lay in their innocuity. New treatments for consumption, while in vogue and believed in, work a high percentage of cures, *no matter what the treatment is*. Confidence is aroused in the sufferer.

Hope turns into belief. Belief, say the suggestionists, is the beginning of the cure. The Book of Proverbs has been aptly quoted: "A merry heart doth good like medicine; but a broken spirit drieth the bones."

While suggested courage thus does good, suggested discouragement does no end of harm. If a child is caught telling a lie or stealing, and is upbraided in a tactless way, it will be left under the impression that it is by nature deceitful and dishonest. This idea will perhaps be deepened by subsequent lapses, and the child's character may be ruined. If, on the other hand, the child, when caught in a theft, is shown how inconsistent this conduct is with its former honesty; if it is persuaded that its former good conduct was lovable and meritorious, true to the child's real self, then the child will have courage to live up to its former ideal. Often it happens that an impatient teacher will tell a child, "You will never be able to sing a note," or "You will never be able to do sums," or a parent will say, "You are a sulky, bad child, and nobody will like you." Such foolish reprimands may do great harm. The child will suggest itself into the state of not being able to sing, or do sums, and in the last case, may become a confirmed misanthrope.

In moral matters suggestion plays a big part. Many of our virtues and vices are developed through the influence of suggestion. The idea is suggested to A that B does not like her. Then she

begins to act in a strained way towards B, and finally ends by disliking B; a quarrel perhaps ensues. If, on the other hand, the idea is suggested to A that B does like her, all is quite the reverse. The devoted wife, who tells her husband again and again that he is a wretched, worthless fellow, and that he is a slave to drink, and that he prefers his glass of spirits to his family, is doing the very worst thing she could do. She is suggesting this unfortunate state of mind to her husband. He perhaps begins to feel himself a slave to drink, and so on. He comes to think, "I can't resist, once I have a drop or two taken." He thus makes a law for himself, and resistance becomes more and more improbable. "*L'idée incline à l'acte*," as Father Eymieu writes. The idea that he will yield inclines him to yield, and this idea is perhaps put into his head by his devoted but foolish wife.

When a child burns or hurts its little hand it runs crying to its mother. The mother "kisses the part to make it well." The child believes itself cured and stops crying. A little child, trained to practice auto-suggestion, was out one day for a walk with its mother. It cut its hand badly on barbed wire, but instead of crying, it ran up laughing to its mother, repeating a Coué formula, "It's not hurting, it's not hurting."

The Coué system, then, is quite in harmony with human experience, for we are all to some extent children, and very many of us suffer from "com-

plaints " as unreal as the imaginary fears, tirednesses, and indispositions of children. Coué tells us to treat ourselves as though we were children. A pain comes — then say again and again, "It's passing, it's passing." (A mother would say, "There's a good child! Your finger is all right now.") And if we are ill, we should say morning and evening, when in a drowsy state, several times, "In every way, day by day, I grow better and better."

There is not much to say by way of criticism of the theory and method of Emile Coué. In theory his position is perfectly sound. Various forms of faith-healing have been known for ages. Suggestion, or auto-suggestion, is not an ideal term to describe the phenomena, but it is quite good enough. His method is also sufficiently good to succeed in many cases. It is not, however, an ideal method. He attributes a great deal to the *unconscious will*, but one should not too readily find fault with this term. In the storehouse of the mind lie many potentialities — in what form we know not, perhaps as images — which become dynamic even before we are conscious of them. Appeal to the "unconscious" or the "*unconscious will*" is no blind appeal, and it is unquestionable that the "mind" working unconsciously plays its part in the phenomena of suggestion.

Still, there is little really new in Emile Coué's theory and method. He has done good work in again bringing to light the deep significance of sug-

gestion. And he has focussed his theory in a practical way. There is nothing in his theory and method, when rightly understood, which should hinder Christians from belief in or use of his help. And everyone should derive advantage from studying this new edition of old wisdom.

Some Catholics may be alarmed at the thought that the wonder-works of Coué will rob contemporary miracles, say the miracles of Lourdes, of their evidential value, and give grounds to enemies of the supernatural to cast doubt on all miracles. "Here," they will say, "at Coué's word the lame walk, the blind see, and so forth. What then of the miracles of the Gospel? If by suggestion these wonders can be wrought, why invoke divine power?"

The answer to such "difficulties" is not hard to find. What can be done naturally, both as to *the fact* and *the manner* in which the fact is brought about, is a natural work and not a miracle. No Catholic claims such works or wonders as "miracles." Miracles are works wrought against or above the power of nature, either as to the *fact* or the *manner* in which the fact is brought about, or as to both. And at Lourdes, to say nothing of the Gospel miracles, wonders have been wrought which seem most certainly to be beyond the power of nature in either or both of these respects. When a medical bureau, of the type of the Lourdes medical bureau, is established at Nancy, and when it can bring forward cases parallel in every respect

to the medically authenticated Lourdes miracles, it will be time enough to cast doubt on the latter. Suffice it for the moment to say, firstly, that at Lourdes the types of "wonder-works" achieved by the New Nancy School are not put forward as authenticated miracles, but as mere "suggestion" cures, and, secondly, even the authenticated miracles of Lourdes are in no sense objects of divine faith. In regard to all of them Catholics are free to believe in them or reject them, according to their estimate of the evidence in support of them.

As to whether the new method has succeeded in curing organic as distinct from functional ailments the evidence seems somewhat uncertain, although the claim for such cures is made by Baudouin and others. The present writer does not see any great difficulty in admitting the possibility of organic cures by auto-suggestion. When a lesion of an organ occurs, or say a bone is broken, there is in addition to the organic trouble a functional disturbance as well. Functional trouble and organic trouble go hand in hand. Now it is admitted that auto-suggestion can cure or help to cure functional disorder. And it is admitted that such functional cure can at least hasten the repairing of the injured organism — it may be that functional healing, in some cases, leads to organic healing — the knitting of a bone, for instance, might be greatly aided by the disappearance of tumors around the lesion — and Coué claims to have cured tumors of all kinds.

Nevertheless, it is in the field of nervous disorders that auto-suggestion can do most good. Professor Dubois¹⁴ wrote many years ago: "As soon as a man believes himself sick, he is sick. It is not that he merely thinks himself sick. He becomes really and physically sick." And again: "The neurasthenic is on the road to a cure as soon as he has the conviction that he is going to get well. He is cured the day he believes himself to be cured." Once more, these are old ideas, but for that they are none the less interesting.

¹⁴ Quoted by Father Eymieu, p. 51.

CHAPTER XIII
THE METHODS OF PÈRE
EYMIEU, S.J., AND
DR. VITTOZ

HAVING described the psycho-therapeutic methods known as "*psycho-analysis*" and "*auto-suggestion*," we now turn to consider briefly two other methods, those of Père Antonin Eymieu, S.J., and Dr. Vittoz of Lausanne. The method of Père Eymieu,¹ which we shall consider first, with special reference to the subject of Scruples, is founded on the theory of M. Pierre Janet concerning vital energy.

I. THE PSYCHO-THERAPY OF PÈRE EYMIEU, S.J.

Père Eymieu begins by accepting as a working hypothesis Pierre Janet's conception of vital energy. The tension of this energy may be high or low, above par or below par. When it is below par mental functioning becomes defective, and obsessions or some other form of psycho-neurosis may result. The vital energy is no longer equal to the

¹ *Le Gouvernement de Soi-même. L'Obsession et le Scrupule*, by Antonin Eymieu, S.J. (Perrin et Cie., Paris, 27th ed. 1922),

work on hand, nor can it overcome the difficulty that has to be faced. There are two ways out of the impasse. The first is to raise again the tension of the vital energy. The second is to lessen the difficulty. The former may be accomplished by stopping wastage, and by series of exercises; the latter by methods of analysis, persuasion and suggestion. Direction and guidance is always necessary in the case of scruples or obsession. If left to himself the patient inevitably grows worse.

By *vital force* Père Eymieu understands that force which brings into being vital acts; in other words *life* conceived as an energy, having more or less tension, concentrated and "canalized" so as to do this or that. "The mysterious force which produces these acts, and which we seek if not to define, at least to explain, is then something more than life, directed, 'canalized,' toward such and such a point. Rather, it is this very life, understood as having a certain intensity, and in a certain state of tension."² Every force has a certain tension, and unless the required tension be present the work will not be done. An electric current with insufficient voltage will fail to light the lamp. And similarly, in the realm of psychical phenomena, unless the tension of the vital force be sufficient, consciousness will be wanting in certain acts. "Any current of life whatever does not suffice for the conscience to break through; intensified life is necessary

² *Ibid.*, p. 138.

to a superior state of application.”³ The higher activities of life, moral duties, reasoning, and so forth, require a higher tension of vital force, than do the simpler and more primitive activities. There is, as it were, a certain hierarchy of vital acts; the higher require a greater voltage than the lower. And again, *mutatis mutandis*, since at a given moment vital energy⁴ is limited in amount, the greater and wider the field of its operations, the lesser will be the tension. Energy can be concentrated on a few objects or spread over many. In the former case the tension is relatively higher; in the latter case it is relatively lower. The formula of mechanics can be understood in a psychological sense.

But, in view of the “hierarchy” in acts, of the more exhausting nature of some than of others, it will also be understood that vital tension varies inversely with the difficulty or complexity of the act. Such is the conception on which Père Eymieu’s theory rests. “It is sufficient to say that obsession occurs when there is no longer equilibrium between the vital tension and the difficulty to be overcome, whether it be that the difficulty be grown too great, or the tension be sunk too low.”⁵ It follows that

³ *Ibid.*, p. 139.

⁴ *N. B.* (cf. pp. 143, 144). *Vital energy* there must be, else the acts of a man would not be *vital*: “There is something which makes it (the act) vital; there is something which makes it living and conscious, something which makes it an idea, sentiment, desire, wish, etc., and something which produces that vital work; I call it *vital energy*.”

⁵ *Ibid.*, p. 161.

obsession is the result of disequilibrium. There are some folk of low mentality, such as idiots, whose vital tension, though low, is sufficient for the purposes of their lives and who never become obsessed because they never face any serious difficulty; their supply of energy suffices for the demands made upon it. There are others (Père Eymieu instances⁶ St. Ignatius and St. Francis de Sales, victims for a time of obsessing scruples) whose vital tension is high and yet who become obsessed on account of the insufficiency of the supply of energy to meet the exorbitant demands made upon it.

It may be wondered at why obsession so often takes the form of *religious* doubts and scruples,⁷ and why scrupulous people should fail in their efforts to attain to *certainty*. This powerlessness results from the lack of vital force. According to Père Eymieu it is precisely those mental acts to which we attach most importance, which spring from the depths of our heart, acts of faith and religion, that are most exhausting psychically. They stand at the summit of the hierarchy to which I referred. And while the tension of the vital force is perhaps sufficient for acts that are lower down on the scale, it is, in scrupulous persons, insufficient for acts at the top of the scale. "The failure to attain to certitude results from the disproportion between the vital tension at the disposal of the obsessed person, and the psychological state he wishes to reach. The

⁶ *Ibid.*, p. 162.

⁷ *Ibid.*, p. 164.

powerlessness, based on this disproportion, is revealed, first of all, and especially, in connection with the act that he is above all interested in, because such an act, being for him the most complex, is the most difficult, and necessarily stands highest in the hierarchy of acts. . . . When the level of vital energy sinks, the "summits" of life are first seen to emerge, just as when the tide ebbs, the first places to appear are the high dunes."⁸ And hence it happens that those who care little about religion are much less frequently troubled by religious scruples. Again the vain efforts of the scrupulous to attain "certitude" only result in a further exhaustion of vital energy, and leave them worse off than before.

At times scruples and obsession result from a greatly increased demand upon the vital energy. A man who suddenly changes his way of life and begins to live up to a very high and exacting standard of conduct naturally experiences an intense strain. Long periods of meditation and prayer exhaust the natural resources of energy, and sometimes ascetics break down. Yet such ascetics may have had no predisposition whatever to obsessions. "We have seen," writes Père Eymieu,⁹ "among obsessed patients, some who showed no morbid predisposition in their previous life, *and who become obsessed in spite of the fact that their psychological tension is normal*. This phenomenon has its explanation. It is sufficient that a disproportion

⁸ *Ibid.*, p. 164.

⁹ *Ibid.*, p. 173.

should spring up between the resources and the needs, and the obsession results from the fact that the needs or difficulties are increased above normal." In the sudden change from worldliness to a highly perfect life, and in the overtaking of psychical energy, Père Eymieu sees the natural causes of the scruples which afflicted St. Ignatius in the early period of his conversion. Even if all his austerities had left his vital force intact, it would not have sufficed for such an ambition."

It may appear strange to some readers that Père Eymieu should regard the scruples of a Saint from a purely scientific and "natural" point of view. But in doing so he is perfectly within his rights. He expressly states that his point of view is that of a psychologist, not of an ascetic writer. *Far from denying the influence of the supernatural, he expressly presupposes it.* But at the same time he prescinds from it in discussing observable natural phenomena. To prescind from the supernatural is, of course, not to deny it. He considers how the divinely ordained natural laws work out in mental diseases as in other natural phenomena. And in cases where there is no miraculous intervention to ward off the ill effects of overtaking natural resources, as in the case of St. Ignatius' scruples, he is quite within his rights in describing the natural course of the malady, and in indicating what he considers to be the cause of it.

It would be too long to go into all the details of

Père Eymieu's theory, but suffice it to say that he finds in it the explanation of all the symptoms and phenomena of obsession and scruples. It remains to be seen how he proposes to cure patients suffering from this malady.

He admits that it is difficult to cure the malady, especially where there is a chronic state of deficiency of vital tension. And even when the deficiency is accidental, the resulting trouble quickly becomes deeply rooted. The obsessing idea, like everything vital, strives, so to speak, to persist in its existence, and to develop at the expense of its surroundings. It creates associations around itself and so "digs itself in." The attention given to it by the patient strengthens and energizes it still more. As it is usually an idea which touches the patient deeply, he cannot but be interested in it. "A neurotic cannot become indifferent to what most of all interests him. Hence his powerlessness to turn away from the morbid thought which is stifling him. Left to himself he is incapable of putting up a defense, and if he does not defend himself, the malady does not diminish, but gains complete control of him. Without outside help, and suitable treatment there is no hope for him of a cure."¹⁰ Père Eymieu's prognosis of success depends, therefore, in the first place, on skilled treatment by another. With such treatment improvement is usually to be hoped for, and often complete cures are won. The malady

¹⁰ *Ibid.*, 208.

is more resistant when of long duration and of growth in early life; for if the vital force is not sufficient for the simple life of a child, there is reason to suspect constitutional or hereditary weakness.

The treatment consists, first of all, in gaining the confidence of the patient, of insisting on obedience, *and of awakening a sincere desire to be cured*. Secondly, it consists in so analyzing the obsession as to render it more simple and so to weaken its hold on the patient's mind. Other subsidiary difficulties and problems in the patient's mind have to be cleared away. Thirdly, the psychical tension of the patient has to be raised. This is done by putting a stop to waste of energy of all kinds, physical and psychical. Fatigue must be avoided. Worries and introspections must be given up. Feelings of sadness, and unnecessary indulgence in emotions must be abandoned. Difficulties and problems must be avoided; and the health must be built up by rest, sleep, distraction, good air and good food. Certain exercises, not too fatiguing, should be practiced in order to increase psychical energy. These exercises may be will-exercises, or exercises in concentration of attention.¹¹ Sentiments of joy and confidence must be cultivated, and the patient must "act as if" he were full of hope and courage. Lastly, to cherish and pursue an ideal is a supreme help. "But nothing is more soothing, nothing

¹¹ We omit details of these exercises. Suffice it to say they are admirably planned by Père Eymieu.

better unites all forces, nothing makes life more concentrated, richer, more cheerful, more vigorous, than a great passion, that which we have called for lack of a better term, the ideal."

If one may venture on a criticism of the theory of Père Eymieu, it does not seem to explain sufficiently the activity of the obsessing idea. Behind this idea, energizing it, and keeping it in constant activity, there must be a great supply of psychical energy. The trouble does not seem to be so much a lack of vital energy in the organism, as a mal-direction of it. An excessive proportion of vital energy goes to energizing the obsessing idea. The problem then is, how to draw off this supply of energy from that particular path, and how to make it flow in more useful channels. *Indeed the whole difficulty in treating an obsession resolves itself into isolating or, so to say, anaesthetizing the feverish idea.*

Those who have been exceedingly worried about some matter, and kept in a constant mental ferment about it, night and day for say a few weeks, know what an extraordinary relief it is when the difficulty is solved, and when the worry disappears. At once they feel they have again ample energy for all their normal interests. All during the time of the trouble they had a quite sufficient sum of vital energy in their organism, but so much was being drawn off to keep aflame *the worry*, that they had not a sufficient supply for other matters.

The theory of Père Eymieu seems to leave this point still in doubt: *What is the source of energy of the obsession?* Why has it become a centre of activity? Why, in particular, should *this idea* become active more than others? Psycho-analysts have a definite theory, whatever its worth, which supplies an answer to these questions.

As regards the method of treatment of Père Eymieu it is hard to find fault with it. He perhaps minimizes or hides the delicacy of the work of weakening or "*lessening the difficulty*" (*abaisser la difficulté*) and he does not do justice to the advantages to be derived from suggestion. "Hypnotism and suggestion do not succeed with obsessed persons. Efforts to employ them have always failed."¹² It may be true that hypnotism does not usually succeed with obsessed patients, but it is not true that suggestion is of no avail in dealing with them. And when Père Eymieu comes to recommend means of "increasing the capital" of psychic force by utilizing the sentiments, "acting as if full of courage, hope, and joy,"¹³ we have an active form of auto-suggestion proposed. Again in the wise remark,¹⁴ "If the director fails to inspire absolute confidence he ought to hand over his task to someone else who will be more fortunate," we see that Père Eymieu is a very convinced believer in the absolute need of suggestion, for confidence can be inspired in no other way. Indeed

¹² P. 215.¹³ P. 346.¹⁴ P. 221.

all therapeutics ultimately depend on suggestion. In fine, whatever merit the theory of Père Eymieu may have, there is no doubt that the method of treatment recommended is sound; and in skilful hands it should prove efficacious. But with this method, as with every other one, nearly all depends on the skill, tact and power of sympathy of the doctor. "The worth of the psychical treatment depends upon the worth of the therapist."¹⁵ Père Eymieu's method is an enlightened and modernized application of the old rules for treating "*scruples*" — that heart-breaking mental disease now more commonly known as "*obsession*."

II. THE PSYCHO-THERAPY OF DR. VITTOZ OF LAUSANNE

We now turn to the theory and method of Dr. Vittoz, with special reference once more to his treatment of scruples and obsession.¹⁶ His central theory is that the mental abnormality is due to incursions into consciousness of ideas, which have (owing to lack of the power of mental control), broken loose from the unconscious depths of the mind. His aim, therefore, is to help the patient to regain mental control. In dealing with scruples, Dr. Vittoz starts with the assumption that they

¹⁵ P. 328.

¹⁶ This method is described in the admirable work of Abbé d'Agnel and Dr. d'Espeney. *Direction de Conscience-Psychothérapie des Troubles Nerveux* (Téqui, Paris, 1922).

result from a deficiency of control of the unconscious by the conscious mind. The deficiency of control, which is complete in hysterical people, is only partial in the scrupulous. It fails to check the invasion of the sub-conscious. There is a lack of "cerebral control" — and the object at which Dr. Vittoz aims is, by means of well-chosen exercises, to reestablish "cerebral control." The scruple, like the obsession, is an essentially psychological trouble, founded in the mind and not in the organism. It is "a psycho-neurosis," a functional nerve disease. No causal nexus has ever been found between the scruple and physiological functioning, or anatomical disorder. It is, then, presumably a disorder of mental functioning, and the treatment must naturally be psychological. "In order to combat efficaciously a psychological disease it is logically necessary to care for the psychism which is its root. To rid the subject of the scruple is equivalent to regularizing the play of his mental operations."¹⁷

Mental exercises have thus to be undergone with a view to reeducating the subject in the art of willing and thinking normally; a system of mental gymnastic exercises has to be discovered calculated to meet the necessities of his case. These exercises, as designed by Vittoz, consist in "acts of consciousness," "acts of concentration," and "will acts." The disease is thus attacked indirectly, undermined, as it were, and normal mental life restored.

¹⁷ *Direction de Conscience*, p. 378.

Dr. Vittoz is not at all concerned with the "content" of the scruple. It is not the doubt, or fear, or idea, in its representative sense with which he is concerned, but *the existence of a failure of control*. He never discusses the subject matter or "content" of the scruple with the patient. He sees in "reasoning" with the scrupulous person mere loss of time. "To wish to cure these unfortunates by argument is a senseless enterprise. The more one lets them talk, the more one opposes them with solid argumentation, the more the disease aggravates itself."¹⁸ Dr. Vittoz forbids his patients to talk of their scruples, and considers them merely from the psychological point of view, as a mental disorder.

The first type of exercise is directed against the self-centred, introvert character of scrupulous persons. By force of preoccupying themselves with their mental worries, they grow out of touch with reality and with their surroundings. They appear unaffected by objective stimuli; they live too much within themselves. Dr. Vittoz aims at making them realize the "opposition" between themselves and the outside world. He aims at drawing them from the abstract world of thought to the concrete reality around them. He makes them go through simple exercises, consciously and deliberately moving or bending their arms and legs. These are *conscious acts*, and produce in the patient a certain sense of living and moving. "I have the sensation of mov-

¹⁸ *Ibid.*, p. 381.

ing and of living which I had partially lost.”¹⁹ The next exercises are concerned with giving conscious attention to a figure, say the figure *eight*, “8” drawn, as it were, in the mind or phantasy. When due progress has been made in these exercises, others, designated to arouse “*sense concentration*,” are undergone. A metronome is started, and the patient watches it and repeats the “tic-tacs,” or he is told to touch some object and to preserve as long as possible the sensible impression it gives. By such means “*sense concentration*,” of sight, hearing and touching is exercised.

The next exercise is more difficult, and concerns mental functioning. The patient has to write and pronounce mentally the figure *one*, many times in succession, without allowing any other thought to interfere. He writes it, thinks and speaks it mentally, pauses with his mind blank, and recommences again. This exercise helps mental concentration. “After many efforts he persuades himself that he can fix his thought for a few seconds. This first conviction encourages him in his onward march. With time and industry, he gains another conviction, still more important, that he is able to concentrate *when he wills and as he wills*.”²⁰ This means a first victory of the conscious over the sub-conscious. Such exercises *in conscious acts* aim at reestablishing contact between the scrupulous person and the exterior world, and of making him more conscious

¹⁹ *Ibid.*, p. 384. Remark of a patient.

²⁰ *Ibid.*, p. 386.

of his own reality and of that of others, and of making him live a more concrete life.

The next object to be gained is to win for the scrupulous person the power of fixing his attention, of lessening the distraction of his mind. Dr. Vittoz in turn gets his patients to concentrate on the idea of "calm," the idea of "energy," and the idea of "control."

The next step is to exercise the patient in the "elimination" or "deconcentration" of attention. "By this means he proposes to make himself able to drive out of his head the ideas which trouble and torment him."²¹ Spiritual directors urge scrupulous persons to drive from their minds depressing thoughts. Vittoz, taking his stand upon what is material and concrete, gets his patients to place five objects on a piece of white paper, to study them one by one, and then to remove them one by one, mentally and physically. Vittoz offers the advantage of drawing from the scrupulous the ideas which obsess him by concentrating his attention on visible and tangible things. In order to produce good effects several repetitions are also necessary. It is by giving him some occupation that one succeeds in eliminating voluntarily the most abstract ideas.²² Other similar and more abstract exercises are then undertaken.

The exercise of "deconcentration" consists in, first of all, fixing mentally a figure, say the figure

²¹ *Ibid.*, p. 394.

²² *Ibid.*

one, and then slowly and deliberately eliminating it, until it has completely disappeared from the mind. Exercises in producing a long-continued mental blank, a mental repose, are also given. "Intervals of more or less prolonged mental blankness, during which the subject eliminates every thought, however insignificant it may be, must succeed acts of attention."²³

Thus three evils are overcome: *Conscious acts* militate against the dissociation of the personality; *acts of concentration* against the dispersion of intellectual energy; and *acts of elimination* against the obsession itself. And, *pari passu*, three advantages are gained: consciousness of the ego and of the exterior world; control of the unconscious by the conscious; and the power to drive out at one's will invading thoughts.

Next the will has to be built up and its energy renewed. Without will and effort on the part of the patient there is no possibility of a cure. "The reason for the existence of the exercises which he orders him to perform is to make him psychologically capable of himself desiring his cure, and it is to help him to make this voluntary effort with the least pain and under the best conditions possible that he enforces his method."²⁴ Then follow will acts, in which the subject practises saying, "I will" with intense effort and muscular contractions, holding back his breath. Next, slowly and deliberately,

²³ *Ibid.*, p. 395.

²⁴ *Ibid.*, p. 396.

the subject has to move his legs and arms, in virtue of the will act which he elicits. In fine, "from the day when a scrupulous person can say, within himself, of himself, clearly and categorically, 'I will to do this,' or 'I will to do that,' one can be quite certain of his cure."²⁵ The subject is trained to say and will: "I mean to control myself"; "I will to be energetic"; "I will to will."²⁶

Having described thus far the method of Vittoz, we think it well to refer to a rather fanciful manner he has of testing the regularity of cerebral functioning, by placing his hand on the patient's brow and "feeling" the mental vibrations. "Every cerebral operation has an exterior resonance (répercussion) capable of being felt by a hand experienced in the work, as mine is."²⁷ We cannot but express astonishment at this claim, and at the absurdity of calling it, as does Dr. Vittoz, *a discovery*. "Thanks to this wonderful discovery," he writes,²⁸ "it is possible and even easy to perceive a difference between a brain that is calm and one that is agitated; between a thought controlled by the will and one which is not so controlled." Personally we regard such "cerebral auscultation" as pure nonsense, and regret that Dr. Vittoz should have marred his excellent method by any allusion to such fanciful practices.

²⁵ *Ibid.*, p. 398.

²⁶ These Exercises resemble those described in *Strength of Will* (published in 1911, by P. J. Kenedy & Sons, New York City).

²⁷ *Ibid.*, p. 402.

²⁸ *Ibid.*, p. 403.

CHAPTER XIV
THE PART OF THE WILL
IN PSYCHO-THERAPY

I N almost every form of psycho-neurosis there is noticeable a certain incapacity or disinclination to make efforts. This disinclination becomes more marked as the disease deepens and spreads, and as the patient becomes more and more mentally wearied, depressed and frightened. In neurasthenia especially the disinclination to make an effort becomes so strong and so rooted that the patient almost collapses at the thought. Abuleia (incapacity to will) becomes a prominent symptom, and lies at the root of the "fatigue" complained of.

Resulting from this shirking of effort, we find in psycho-neurotic patients an ever-widening deterioration in mental functioning. Their capacity to concentrate attention diminishes. Their memory too deteriorates. Their power of forming decisions of an earnest kind disappears. The reason is clear. Each of these functions is dependent on willing or making efforts. Concentration is voluntarily prolonged attention. Memory implies the voluntary as well as the involuntary calling up of past experi-

ences. Decision, especially, is a will act, and so with the conscious and unconscious avoidance of will-efforts, these other functions soon deteriorate.

It has already been pointed out that psychotherapy implies not only *mind-exploration* (with suggestion, and persuasion), but also *readjustment and reeducation*. This readjustment and reeducation calls for the cooperation of the patient. It is he who has to adapt himself to actuality. It is he who has to exercise his mental functions duly and appropriately. *He has in a sense, to heal himself, and this self-healing necessitates effort*. In the end he must make efforts. He must pull himself together and arouse himself from the psycho-neurosis, which he has been, we suppose, taught to recognize as a kind of evil dream. The dreamer may, while recognizing that he is dreaming, still cling to his dream and choose to abide in it. If he does so, he will remain unadapted to surroundings, he will remain a psycho-neurotic. To be cured, then, it is necessary for him, having become persuaded that his obsession is a phantasy or evil dream, that his hysterical symptom is "an unreality," to pull himself together and shake it off, as he would throw off a ridiculously colored hat. But such an effort is a will-effort, and he has become disinclined to make a will-effort, and perhaps partly incapable of doing so.

When one studies closely a person suffering from an obsession, and when one sees, time after time, the failure of this or that carefully planned attempt

to get the patient into touch with reality, and when one meets with that "resistance" of which I spoke,¹ one feels that the patient is guilty, to some extent even consciously, of not making an effort. No doubt he has lost confidence, and is depressed and wearied, but even granted all that, a small effort on his part, could it be coaxed from him, would facilitate the cure enormously. But it seems vain to expect such an effort, and yet without it the cure is not possible. What, then, can be done?

In the course of treatment one has to beguile the patient into undertaking some small exercises of will, disguised in some form or other, *so as to keep the faculty of effort alive*. And ultimately, when the patient has become emotionally aroused, and intellectually convinced, one should suddenly put before him the making of a specially required effort. If failure results, one has still to continue the treatment, while awaiting another and perhaps better opportunity of evoking the effort. Meanwhile one has to maintain and deepen one's hold on the trust and confidence of the patient.

In my book *Strength of Will*² I have given a method of will-training, with suggestions for graduated will-exercises, of a kind calculated to tone up and strengthen the will, and to cure it of its weaknesses or "diseases." These exercises, although

¹ Cf. chapter on "Obsession."

² Published by P. J. Kenedy & Sons, 44 Barclay St., New York City, 1911.

not primarily designed as a method of psychotherapy, are readily applicable for that purpose.

The Reverend Dr. T. Verner Moore, in his recent excellent work, *Dynamic Psychology*, refers to these exercises, which he recommended to several of his patients. They reported that *they were helped by them*. Dr. Moore writes (p. 389): "On the basis of our analysis of the pathology of the will, we would suggest that volitional training could be attempted along the following lines: For the strengthening of the will itself there should be exercises in the keeping of resolutions for definite periods of time; to do without something that one craves, such as tobacco, candy, etc., to rise promptly every morning at a certain hour, etc. Such exercises have to do with real volitional problems and would probably be more effective than those suggested by Father Barrett, although his exercises might be a useful adjunct." In justice to ourselves we should like to point out, firstly, that in our book, over and over again, we emphasize the advantage of "keeping resolutions for definite periods of time" — *definiteness as to duration, manner and matter is insisted on*. It is one of the central points of the method we outlined. To quote our own words from *Strength of Will*, we demanded "the persevering fulfilment" of the resolution; "the regular payment of the instalments"; and that "*the predetermined bounds should be most faithfully observed*, and during the period of the tasks no change what-

soever should be made," etc. As regards beneficial results from isolated acts of self-denial, and the benefit of regular early rising, we readily conceded such advantages. Discussing, for instance, as a type of will-exercise, the spending of five minutes every morning at Sandow's exercises of body-training, we wrote: "No doubt such exercises indirectly benefit the will, but *the object of our exercises is to benefit the will in the most direct way.*" Dr. Moore seems to think that exercises having to do with "real volitional problems" (such as not eating candy) are the most effective. These exercises he doubtless has tried himself, but of our exercises he writes that *he had "not the courage to give them a personal trial."* Are the former type of exercises more effective because they demand less courage?

At first, exercises in attention should be given for a few minutes, at stated times, each day. The patient just attends, consciously, to what he does when he moves his arms or head. He "notices" himself looking out the window or walking. "Now I am looking out this window. I am seeing things; I am looking at a tree in front of a house," etc. The object of these exercises is to "awaken" a little the neurotic patient, to prepare the way for an adaptation to reality, and for a unification of his conscious life.

Next there should follow very simple will-exercises, such as raising the arm, walking across the

room, opening and shutting a door. The thing done does not matter. The importance lies in the fact that the act is deliberate and voluntary. "What we want is *to build up the will by willing*. For this reason our tasks should have no ulterior practical object. They should be trivial and useless for all other purposes except for our one sole purpose of will-training."³ The advantage of these simple, trivial exercises is manifold. They awaken confidence and a sense of power, and of capacity "of getting things done." They keep "the faculty of effort alive," to use Professor James' phrase. They partake of the quality of that mind-culture about which Professor Sedgwick wrote:⁴ "It is impossible to estimate the ultimate good to be derived in direct ways from any bit of mental cultivation that one manages to give oneself."

These will exercises can be varied and graduated, now taking the form of acts of concentration or attention, for instance, by writing down a word, "river," "aeroplane," and thinking steadily on it for a few minutes; or they can take the form of awakening an artificial feeling of confidence, and keeping this feeling aroused for a few minutes while, say, walking round a garden. Or a good exercise is to get the patient to repeat, every morning and evening in the proper spirit, the famous Coué formula: "Day by day, in every way, I grow

³ Cf. *Strength of Will*, pp. 138, 139.

⁴ *Ibid.*, p. 142.

better and better." The carrying out of any of these exercises will discipline the will, and keep the faculty of effort exercised.

But one must not shut one's eyes to the difficulty involved. The patient, if he is a "bad case," will be unable to arouse any interest in these exercises. He will not cooperate, or only do so in a half-hearted way. He will "resist" this phase of the method, as he "resists" the other phases. When he is improving and on the mend he will cooperate better and derive more profit from the exercises, but while badly caught and held by his obsession he will show no signs of profit. Still the exercises should be tried, and in some form or other persevered in. *Will-culture is essential for permanent cure.*

The "French school" have criticized the "psycho-analytic school" severely on the grounds that the latter school does not insist sufficiently on the need of *getting the patient to act*, whether by exercises of reflection, attention or voluntary effort, and that it over-emphasizes the importance of mental exploration. This criticism is not without some justifications, but the fact remains that *it is often almost hopeless to think of getting psycho-neurotic patients to practise mind-culture*. It may be added that many such patients, when in normal mental health, are quite adequately developed and trained mentally, and that their psycho-neurosis is not due to deficiency in that respect.

The importance of the part played by the will in psycho-therapy has not been fully recognized, partly owing to the reluctance of modern psychologists to admit the distinctive spiritual nature of volitional acts. In a sense the will gives the lie to many modern theories. There are countless people who should be nervous wrecks but who continue, as it were, in spite of nature's laws, to do stupendous work, owing to their will-power. Often such men take little food, practically no exercise and little sleep. They are perhaps debilitated by disease, but by will-force they hold themselves together, dominate incipient neurosis, and perform herculean labors. No doubt, in the case of Saints supernatural aid was given, but prescinding as far as we may from the supernatural, their triumph over nature was due to their will-power. The will has a mysterious way of sending reinforcements to the weakest point. When one is on the verge of collapse, through fatigue or shock or depression, the will calls up new resources and the danger point is passed. And this is not so much to be wondered at when we remember that the will is our most spiritual power, "*vis immaterialissima et maxime a carne separata*" ("our most immaterial force and most independent of flesh and blood"), as Duns Scotus wrote.

A well trained will is the best prophylaxis (antecedent remedy) against neuroses. It means confidence, decisiveness and consistency of purpose. It

does not tolerate a state of doubt or hesitation, which is the breeding ground of obsessions. It banishes those "psychical giddinesses" of incipient hysteria. It crushes by force the early fatigue symptoms of neurasthenia. It opposes those vague states of emotional depression that lend color and intensity to neurotic states of all kinds.

The man of strong will has to such an extent acquired the habit of making efforts, and of continuing the efforts in spite of difficulties, that he has within himself the energy to heal his own mind troubles. He is not "soft," or languid or fearful or easily discouraged. He reacts with volitional intensity against the physiological effects of shock or strain. He has the habit of refusing to admit himself beaten. He declines to lie down under imaginary evils or threats. He is so accustomed to rely on the inner strength of his spirit; so accustomed to getting through tasks, however difficult; and so resolved "to fight it out" to the bitter end that mental diseases usually fail to lay hold on his mind.

If, on the other hand, we consider the weak-willed man, the man who gives in readily, who has not the courage to face and fight difficulties, who is hesitating and indecisive and changeful of purpose, the man who has little confidence in himself and who is very dependent on others, we find one who easily succumbs to obsessions and hysterias. The obsession terrifies him. He yields. He cannot get himself to fight it out or to make an effort. He

cannot make up his mind what to do. His untrained will wobbles. He collapses. He waits terrified until someone comes to his aid. Depression seizes him. He gives way to feelings of fatigue, worry and helplessness. He has no deeply formed habit of making efforts, and persisting in making them. He cannot will strongly. He cannot will will. That will-power that is built up by the exercise of the will, of willing will, is not his. He is accustomed to be blown about like the withered leaves of autumn. He has habitually yielded to strong temptations and urgent persuasions. He never has had a mind of his own. And now he feels quite helpless to resist the vivid obsession that fills his imagination and takes possession of him. He is too weak to kick this unbidden guest out of his house.

In connection with obsessions there is one interesting remark of Professor James that deserves to be quoted and interpreted in the light of modern psychology. "*We reach the heart of our inquiry into volition,*" he writes, "*when we ask by what process it is that the thought of any object comes to prevail stably in the mind.*"

Of course Professor James referred to the *conscious* and deliberate holding of an idea at the focus of consciousness. He was writing of voluntary attention. But what happens consciously and deliberately may also happen unconsciously and "in-deliberately," and the whole problem of obsession

turns on this very point: *the unconscious, "indeliberate" holding of an idea at the focus of consciousness*. Can it be that the obsessing idea is held there through what we have described as the "unconscious will"? If it be so, it would be clear what should be the line of treatment.

And there is much to be said for the view here suggested. The "indeliberate" tenacity with which an obsessed person clings to his obsession and the obstinacy with which he resists any effort to remove or loosen it, would lead one to suspect that there was strong "unconscious" volition at work. James' remark at least confirms us in the opinion that the part of the will in *mind-healing*, as well as in *mind-upsetting*, is a very important one.

There is a certain phenomenon which may be called "the sense of willing" and which is accompanied by an affective state of the nature of a "will-feeling." Habitually with men of action, strong-willed men, this phenomenon is present. "The phenomenon most closely connected with the sense of willing is the will-feeling. Will-feeling accompanies every true will-act. When we make determined efforts to achieve a certain task, and when, so to speak, we are conscious of the steady heaving of the will in its straight, single purpose we shall always find the will-feeling present. As we grow accustomed to making will-efforts, and to guiding in this or that direction the force of our will, we become aware of a certain atmosphere of willing.

It is unlike the atmosphere of thinking or imagining. It is an atmosphere which seems to be pregnant with energy, activity and control. It braces and tones one up. We feel more virile, more self-confident for having been in it. It is the mental state of a brave soldier resolutely and undauntedly charging the enemy, or of an intrepid discoverer facing onward towards his goal, as did Columbus or Captain Scott.

When the will-feeling grows habitual and when we live more and more in the atmosphere of willing which we have described, the coming of the will-sense, or the "awakening of the will," is at hand. The improved condition of the will seems to react on the whole body. We grow more alert, more strenuous, more energetic. Courage and power to achieve seem to be more firmly established within. The pleasure we experience in exercising our will grows. We delight in making efforts. To control our actions has now a strange fascination for us. To accomplish a difficult task by sheer will-force now causes us a thrill of manly satisfaction."⁵

The acquisition of this facility in making efforts, and this "sense of willing" must be self-won. "The 'awakening of the will' must come from within. It cannot come from without. No external treatment or influence can awaken a man's will. He must do it himself and for himself. His will, *by willing*, must stir itself to life. It must be self-

⁵ *Strength of Will*, pp. 50, 51.

awakened, and it must keep itself awake by constant exercise. Such exercise will win health and vigor for the will.”⁶

The man of strong will, as contrasted with the man of weak will, is *activity* as contrasted with *passivity*; it is *vitality* as contrasted with *lethargy*. “The life of action is the life of the will. It is the will that provokes to action. In doing so it not only limits and opposes sensuality, but it banishes it for the moment. It means that the life of the spirit takes the place of the life of the senses, that virility reigns instead of softness and day-dreaming.”⁷ In doubt and hesitation the will is inactive, and passivity, receptivity, defencelessness and helplessness result. In will-activity there is no such weak state of receptivity and defencelessness, but there is a healthy output of energy, “a healthy circulation,” to use a metaphor from physiology, and a certain aggressive self-assertion. The latter state is that of interest and healthy absorption. The former state is that of weary “uninterest” and disgust.

We see, then, from this long-drawn-out contrast between the two states of voluntary activity and effort on the one hand, and inaction and passivity on the other, the contrast between the mentality of the strong-willed man and the weak-willed man. The former state makes for mental health, the latter for mental disease and psycho-neuroses. And

⁶ *Ibid.*, p. 53.

⁷ *Ibid.*, p. 105.

so the problem of psycho-therapy resolves itself, from this point of view, into the problem of getting the patient's will to work and function healthfully. The part of the will in mind healing is thus seen to be all-important. And by far the best remedy or prophylaxis against the occurrence or the recurrence of psycho-neuroses is the development and training of the will, hand in hand with religion.

CHAPTER XV

DREAMS

IN our chapter on "Psycho-analysis" reference was made to the interpretation of dreams. It is now necessary to dwell more fully on this interesting and important subject. There can be no doubt that in cases of psycho-neuroses, very great help can be gained by examining the dreams of patients. Their dreams give an insight into the factors of their mental troubles, and into their personal attitude towards them. As Dr. Rivers wrote¹ in his excellent work on Dreams, "even when the physician is already well acquainted with a patient and his conflicts, a dream may have a definite value in helping him to weigh the relative importance of different elements of a conflict, and to estimate more exactly the nature of the personality by which the conflict has to be solved."

To put the matter somewhat figuratively, the dream is to the neurologist what the pulse is to the medical practitioner. As the latter can gauge progress or regression by the "feel" of the pulse, the former can "sense" mental improvement or disimprovement by the general character of the dreams

¹ *Conflict and Dream* (Kegan Paul, 1923), p. 156.

of his patient. "Pulse" and "dream" alike reveal much to those who are skilled in understanding them. And there is no question that the New Psychology has made a great "hit" in working up the science of dreams.

What is strangest, perhaps, about dreams, is our own attitude towards them. *While asleep, they are real for us.* The situation, however incongruous, thrilling or menacing, is actual and true for us. When we awake, we regard it as unreal and false. We are credulous when asleep, incredulous when awake. A few minutes ago we were trembling, actually trembling and crying aloud for help, our brows bathed with cold perspiration as we hung on the edge of a precipice. And now, though still perhaps a little unnerved, still feeling our hearts palpitating, we smile at the foolishness of our dream. But smile as we may, it was very real, very actual. Our emotions were of the same nature as those we experience when awake. Our "reflexes" were the same, too, though perhaps less complete. There was something which appalled us, an experience which we had, and which we can now only partly reconstruct. For by waking up a "*dissociation*" *has occurred in our minds.* We have passed from sleep to wakefulness, we have crossed a chasm, we have broken away from, or "dissociated" ourselves from a previous mental state; and to recross the chasm, to reconstruct the dream fully is impossible.

Hardly less striking a characteristic of dreams is

their intimate significance for ourselves. The moment we analyze a dream, tracing by association its relation to our past experiences, we see how closely it concerns us.² Dreams, unfortunately, cannot be fully or accurately recorded, but what does remain in memory is usually pictorial, comprising one or more visualized acts, staged in a dramatic way. Sometimes the dream feelings are remembered. The stage is crowded sometimes, and there is much scene-shifting. At other times the stage is almost empty and only a commonplace incident occurs. But the details, such as they are, are usually familiar.

The person or persons are in part or wholly recognizable; so too are the places and situations. Much of the dream may come from very recent experience, the street we walked yesterday, or the football game we witnessed. But the juxtaposition is usually incomprehensible. Napoleon may be seen flying across the Channel or Shakespeare type-writing a leader for the *Times*. The dream then takes the things we know, combines them in dimensions that negate space, time and conventions, and puts us playing a part in a puppet show before our own eyes.

All that happens in a dream takes place without

² Cf. *Conflict and Dream*, p. 48. "I mistrust," writes Dr. Rivers, "any interpretation of a dream which does not lead one back to a factor which definitely touches the self-interest of the dreamer, and makes the conflict on which the dream depends one which affects himself."

a hitch, in the sense that *impossible things are accomplished without difficulty*. All is illogical if you like, and untrue to life if you like, but still there is a unification in it; it is "rationalized." It is the work of a libertine imagination, you may say, a freak-work of the mind, a riotous outburst of thought, but even an imagination gone mad is ruled by psychical laws. *A dream, too, is part of ourselves*, springing from and fabricated by ourselves; redolent of our ambitions, fancies, feelings, inner thoughts; *the creation of our mind* working on our own experience and our own outlook on life.³ As a dream it contains diverse things culled from levels high and low of our experience, plaited and interwoven with associations of our mind, toned with inward, shadowy, slowly-growing impulses and feelings, awakening by some unknown unconscious force, moods and impulses that seem to dwell deep down beneath the threshold of our consciousness.

Even such a brief survey of the characteristics of dreams as we have given naturally provokes the questions: *What is the source of dreams?* what purpose do they serve? Why are they so incongruous and bizarre? What is their meaning and significance? Is an interpretation of dreams possible?

To such questions as these Sigismund Freud has

³ Some dreams are accounted for by reference to *telepathy*. (Cf. Bousefield's *Elements of Practical Psycho-Analysis*.) These are the dreams which seem to betray mysterious knowledge of far-off events.

replied in his work on the *Interpretation of Dreams*, which launched the modern theory of dreams that has excited, of late, such an extraordinary amount of attention. This theory ⁴ forms the mainspring of the Freudian therapeutic method which has been widely adopted by psycho-analysts.

“There had been thousands of dream-books before Freud’s day but no scientist worthy of the name had ever occupied himself with those apparently nonsensical phenomena until Freud observed *a strange relationship between the condition of some of his patients and their dreams*. Here, again, he proceeded not from a preconceived theory, but in a purely empirical way, collecting numberless dreams, and analyzing them as methodically as a scientist, finding himself in the presence of an unknown body, would determine its nature and composition by weighing it, measuring it and submitting it to various reagents.” ⁵

When Freud had sufficiently studied dreams he found the solution of the dream-problem in his theory of *the transition from the sub-conscious to the conscious mind*, of dream-thoughts, which

⁴ The theory is not difficult to understand if we bear in mind Freud’s theory of the “unconscious” as the storehouse of all past experiences of which we are not actually aware at the present moment. Some of these experiences (lying in the unconscious) we can recall to mind, to consciousness *at will*. Then we become aware of them. Others we cannot call to consciousness *at will* but, nevertheless, at times they surge up to consciousness. This happens in particular during dreams.

⁵ *Psycho-Analysis*, Tridon, p. 39.

*passed through the barrier of "censorship"*⁶ in a disguised form during sleep.

In the sub-conscious the dream originates. In the sub-conscious *the true dream-thought* is to be found — *the latent* or hidden content of the dream. The urge or wish that is later on satisfied or fulfilled in the dream as memorized, lies in the sub-conscious. *The feeling* or "affect" too, which accompanies the dream, as it appears, finds its true explanation in the sub-conscious dream-thought. The dream, as it appears, is the falsified dream or, if you will, it is the true dream disguised and distorted. *It is called the "manifest content" of the dream.*⁷ It is strange, bizarre, incongruous, symbolic. It is absurd and meaningless in itself. Its true meaning can only be discovered by getting back to the sub-conscious. We must tear off the disguises and untwist the distortions, and then we have interpreted the dream. But how are the dream-thoughts disguised and distorted? That is the core of the problem, and Freud has a ready answer in his theory of the censor. "*Dream disfigurement turns out in reality to be the work of the censor.*"⁸

⁶ See, for the function of the "censor," "Psycho-Analysis and Christian Morality," *The Month*, Feb., 1921, pp. 103 seq.; C. T. S. 2d.

⁷ Dr. Rivers writes (*Conflict and Dreams*, p. 3): "This distinction between the manifest and latent contents, and the view that the manifest content is an expression of a deeper meaning, are the most important and essential features of Freud's scheme of dream-interpretation."

⁸ *The Interpretation of Dreams*, by Sigmund Freud (Transl. by A. A. Brill), p. 135.

“The correspondence between the phenomena of the censor and those of dream distortion, which may be traced in detail, justifies us in assuming similar conditions for both. We should then assume in each human being, as the primary cause of dream formation, *two psychic forces (streams, systems) of which one constitutes the wish* expressed by the dream while the other *acts as a censor* upon this dream wish and by means of this censoring forces a distortion of its expression.”⁹

The need for censorship is so great, according to Freud, that were our primitive wishes to find expression in our conscious mind in undisguised form, they would be so revolting that we should awaken from sleep.

As regards the strangeness and incongruities which appear in dreams, Freud set himself to study what he calls “*the mechanism of distortion*,” the modes by which censorship is effected, and he found them to consist in condensation, displacement, dramatization and secondary elaboration. First of all, there is much condensation in a dream. The central figure in a dream may be a composite person, one who represents many or resembles many. He may have the face of a friend, the clothes of an enemy and the voice of one’s father. Again, a place may be composite, a combination of a church, a theatre and one’s home. In that sense it is said by Freud to be “over-determined.” Again, in a dream

⁹ *Ibid.*, p. 121.

there may be displacements of various kinds. Values may be transferred from one thing to another. Immense importance may be attached to a trifle. A pin or a book may be an object of dread or loathing in a dream, just as it might be for a psycho-neurotic patient. *Dramatization* is readily observable in dreams, and need not be dwelt on here. Lastly, "secondary elaboration," a kind of "rationalization" of the dream, takes place, which further disguises it. This last mode of disfigurement unifies the details of the dream and gives them an appearance of sense and connection.

The sources of the dream are *past experiences*, not excepting those which were *infantile*, long since forgotten, but abiding still in the sub-conscious, and even, so Freud teaches, *pre-natal experiences*. The wish that is fulfilled in the dream — for every dream is a wish-fulfilment — is the result of some primitive impulse or urge of the *libido*. "The dream," writes Freud,¹⁰ "*is the disguised fulfilment of a (suppressed, repressed) wish.*" And in a footnote¹¹ he quotes Otto Ranks, "simplification and modification of this fundamental formula."

"On the basis and with the help of repressed infantile sexual material, the dream regularly represents as fulfilled, *actual and as a rule also erotic wishes* in a *disguised and symbolic form.*"

Later on we shall have occasion to refer to

¹⁰ *The Interpretation of Dreams*, p. 136.

¹¹ *Ibid.*, p. 136, footnote.

Freud's narrowness and perversity in interpreting almost every dream as a sex-dream.

The Freudian method of interpreting dreams is that of "free-associations."¹² The elements or details of the dream are taken up one by one, and all the associations that are awakened in the patient's mind are examined. *The symbolism of the dream* is then interpreted in the light of the knowledge thus gained of the patient, due attention being paid to the significance of the symbols themselves — *for symbols*, according to Freud, *seem to have objective value*, reappearing as they do in the *myths and legends* and literature of the most diverse races. The analyst searches into the individual's sub-conscious, seeking in its depths for the meaning of the dream. And meanwhile *the dream is the via regia to the true knowledge of the sub-conscious*, aiding the psycho-analyst more than anything else to discover the buried complex, the trauma or mind-wound, which disturbs and upsets his patient.

Freud asks the question, "*What is the function of the dream?*" and gives as his answer that it is "to protect sleep." One could not sleep well, he argues, unless one dreamed, for one would be constantly awakened by the mind's instinctive urges. But dreams disguise these tendencies and so keep the mind from being unduly disturbed. *Other psycho-analysts hold that dreams serve such func-*

¹² Dr. Rivers' method was to follow out the associations immediately on awakening from sleep, when the mind was, as it were, in the same mood and atmosphere.

tions as the formation of tentative efforts at the solution of the various disturbing problems or dilemmas. But, though dreams have, it is recorded, been instrumental in solving problems, such does not seem to be their function. For there is seldom much trace of reasoning, or of the exercise of judgment and discrimination in dreaming.

Dr. Rivers, however, strongly favors this view that the dream is a solution or attempted solution of a conflict by means of symbolic images and metaphors. No doubt some dreams are of this kind, but many are merely representative.

Sometimes in a dream we experience a feeling or affect that seems quite out of harmony with the circumstances of the dream as it appears to us. The scene may be joyful, and yet we feel sad. The scene may be one of sorrow, and yet we feel gay, and perhaps dance with joy. What is the meaning of this strange phenomenon? The feeling or affect is that which is true in the dream. "In dreams the only true thing is affect."¹³ Freud's explanation is that the feeling really has reference, not to the "manifest content," but to the "latent content" of the dream, an explanation which stands or falls by his theory as a whole.

There are very many other details of Freud's dream-theory which it would be of interest to dwell upon, and it is only fair to say that no brief summary can do justice to his elaborate and painstaking

¹³ Ernest Jones, *Psycho-Analysis*, p. 206 (quoting Stekel).

research. Even were one to reject Freud's theory as utter nonsense, one should be prepared to pay tribute to his vast work. One must also make allowance in criticizing his theory, for the fact that in dream psychology *anything in the nature of proof is practically impossible*. All that one can fairly ask for is a *good explanation which covers ascertained facts*. As regards Freud's interpretation of symbols we have a right to be sceptical. The only ground he has for asserting, for instance, that such and such symbols are sexual, is a rather weak argument of *the analogical* type. A "serpent," he asserts, "is a sexual symbol in dreams. How does he know? He will refer to myths and legends capable of a sexual interpretation in which the serpent figures. He will refer to dreams in which the serpent appears to have a sexual import. But the transition to the general statement that in dreams serpents are sexual symbols is too hasty and very inconclusive.

Again, let us take as an example, Freudian *interpretation of water-dreams*. These dreams, he understands, symbolize birth. He gives many examples,¹⁴ only one of which can with decency be quoted (though not without omitting a few sentences). He writes:

"Here is a pretty water-dream of a female patient, which was turned to extraordinary account in the course of treatment.

¹⁴ Cf. *Interpretation of Dreams*, by S. Freud, p. 242.

"*The Dream.* At her summer resort on the . . . Lake she hurls herself into the dark water at a place where the pale moon is reflected in the water.

"*Interpretation.* Dreams of this sort are *parturition dreams*; their interpretation is accomplished by *reversing* the facts reported in the manifest dream content; thus instead of 'throwing one's self into the water' read 'coming out of the water,' that is 'being born.'"

The dream, according to Freud, fulfils a sub-conscious wish, *in this case a sub-conscious wish of being born again*. I think it can be safely asserted that no one desires to have a physical rebirth. When Freud asserts that such a desire is in our sub-conscious, *he asserts it gratuitously*. What value can a theory have which is based on such assumptions?¹⁵ Can it be called scientific? Then he boldly tells us to read "coming out of the water," for "throwing one's self into the water." What right have we to do so? Why force such a strained interpretation of the dream?

Lest it be thought that I am unfair to Freud in attributing to him *the absurd idea that pre-natal experiences influence our dreams* and form subject-matter for desires and wishes which are satisfied in dreams, let me quote a further passage from his chapter on "The Material of Dreams."¹⁶

¹⁵ Cf. *Conflict and Dreams*, p. 6. "The idea that an event of a dream may indicate either one thing or its opposite gives an arbitrary character to the whole process of dream-interpretation which must be most unsatisfactory to anyone accustomed to scientific method."

¹⁶ Footnote, p. 244.

"It is only of late that *I have learned to value the significance of fancies and unconscious thoughts about life in the womb.* They contain the explanation of the curious *fear* felt by so many people of being buried alive, as well as the profoundest unconscious reason for the belief in a life after death which represents nothing but a projection into the future of this mysterious life before birth. The act of birth, moreover, is the first experience with fear, and is thus the source and model of the emotion of fear."

This quotation, together with the dream-interpretation quoted above, affords us some insight into Freud's mind as regards his theory of "*the latent content*," "the censor," and "the manifest content." *In truth, if our sub-consciousness contained desires of rebirth and pre-natal experiences a strict censorship would be necessary lest our dreams should awaken us from sleep.* But what are we to think of this theory?

In the first place, it reminds one very forcibly of that "faculty psychology" which modern psychologists who have never read Scholasticism attribute to scholastics. They say that in our psychology we partition the mind into little compartments, placing memory in one, imagination in another, intellect in a third, will in a fourth. From out these little boxes we make the will or intellect hop. Then they do little "stunts," and return to their kennels. Such is the psychology that is attributed to us. And we are accused of dishonesty when we deny

that any scholastic psychologist ever taught such rubbish.

But when one reads of Freud's dream-theory one is inclined to see in it a tendency towards "faculty psychology." Let us put it in this way: *Freud posits two boxes, a pole-cat and a handy-man.* In the first box, the sub-conscious, he places the pole-cat among the bric-à-brac and rubbish of infantile experiences, not omitting pre-natal experiences. The pole-cat (typifying *libido*, which for Freud, as we shall see, is the all-powerful supreme urge and interest in life) *throws out objects*, one after another, from the first box, endowing them naturally with a *nasty smell* (sexuality). The handy-man, *the censor*, catches them as they come, disinfects them as well as he can, *repaints them, changes their shape*, and throws them into the second box, which represents the "manifest content" of the dream. *Accumulated in this box, distorted and disfigured after the work of the handy-man, we see them; they appear to us in the dream.* If we want to interpret the dream we must *try to reconstruct them as they were in their first condition in the first box.* We have to add again the disgusting smell, wash off the disinfectant and the paint, and so try to get back to their original state of rubbish.¹⁷

No doubt this is a crude and unsympathetic

¹⁷ Cf. *Conflict and Dreams*, p. 96. "The special character of the dream," writes Dr. Rivers, "is not due to the activity of a process of censorship . . . but is the result of the fact coming into activity in sleep of early modes of mental functioning."

parody on the Freudian theory, and no doubt the reduction of the theory to the low-level of "faculty psychology" will be hurtful to devotees of the Freudian school but, though perhaps a little exaggerated, it comes near the truth.

The theory of "censor" ¹⁸ is not only cumbersome, but it is ineffectual to explain facts. How does he show that the elements of the dream are disguised, distorted "other things"? The "other things" stripped of disguise — what are they? What kind are they? If they are dwellers in the subconscious what knowledge can we have of them, or of their appearance, or of their repulsiveness? The censor, the critic, no doubt is conscious of some deformity or ugliness in them, else he would not disguise them. But the censor is, in the last analysis, our own judgment. What he knows and sees we know and see. What he disguises we disguise. And what he passes as sufficiently disguised and distorted, we pass as sufficiently disguised and distorted. And what subsequently we see disguised in a dream, we have already seen undisguised — nay, we have been at work disguising. What can be the motive for all this effort at self-deception? for all this "mechanism of distortion"? Freud would answer, I suppose, "in order not to disturb sleep," for such, he says, is the function of dreams.

¹⁸ Although we do not reject "censorship" in the sense of St. Augustine's "unconscious will" "very like reality," we reject artificial and extravagant additions to the conception, such as those indicated in the text.

There remains to be discussed the question of the motive of dreams, and Freud's theory of sex in dreams. "In handling a dream," writes Nicoll, "the aim is to discover the motive of the unconscious."¹⁹ What is the underlying motive of the dream? Is it that broad vital urge that Bergson calls the *élan vital*; that Jung calls *hormé*; that many psychologists call interest; or that Freud calls *libido*? What is it that governs and directs our dreams? Do all the instincts play their part in turn? Some dreams seem in keeping with the urge towards *self-preservation*. In dreams we struggle against injury or death. Some dreams seem in keeping with the *urge of natural needs*. *Hunger and thirst* seem to inspire dreams. Some dreams seem in keeping with spiritual or intellectual needs; some with high ambitions; some with natural yearnings for home or country. Some, of course, are inspired by the animal urge of lust. But when Freud tells us that *practically all dreams are erotic*, and when he points to every conceivable kind of object, from a window to a fish, as a sexual symbol, we feel inclined to laugh. For Freud *the libido urge* (and at least in his *Interpretation of Dreams* by *libido* he means *lust*) pervades all dreams, or almost all. No one denies that lust-dreams occur, and in some cases occur frequently, but *to assert more than that would be untrue*. The presence of

¹⁹ *Dream Psychology*, by Maurice Nicoll, p. 76.

other strong instincts is itself a sufficient guarantee of the falsity of Freud's one-sided view.

Many people believe that dreams are wholly due to *external stimuli*. This theory is called the "*physical causation*" theory of dreams. If during sleep our arms become bare and grow cold, if our head falls suddenly off the pillow, if a mouse creeps over us, or a heavy banging be heard on a wall, the resultant dream is said to be explained by such stimuli. Further, such internal sensory stimuli as that of a *digestive process* upset by a heavy supper is supposed to be the cause of the dream or nightmare. Many dream-psychologists, such as Maury,²⁰ have worked experimentally on dreams. *When tickled on the nose and lips with a feather during sleep, Maury dreamed that a mask of pitch was applied to his face and then removed suddenly, tearing off the skin. His neck was lightly pinched. He dreamed that a blistering plaster was put on him and thought of a doctor who treated him in his childhood. Many other similar experiments were performed, but it was noticed that the same stimulus produced different dreams, and sometimes no connection could be found between the stimulus and the dream. Further, it was remarked that the presentation, if produced, was arbitrary in the sense that it seemed to be only one of many possible presentations, and perhaps took its color or form from*

²⁰ *Le Sommeil et les Rêves.*

the underlying motive of the dream. Freud, with others, admits that "*the rôle of the objective stimuli as a producer of dreams has been indisputably established.*"²¹ The *excitation of the retina*, which still lasts after sleep has come, and which is a typical "subjective sensory stimulus," also plays a part with other subjective stimuli in the formation of dreams. Quoting again from Freud:²²

"Ladd believes that hardly any visual dream occurs in our minds that is not based on material furnished by this inner condition of *stimulation of the retina*. . . . The shifting and endlessly variable character of the spontaneous luminous excitation of the retina corresponds exactly to the fitful succession of pictures presented to us in our dreams."

However, even when we make full allowance for the influence of external and internal stimuli, and even for the arbitrariness of memory-associations thus awakened, there remains much to be explained.

Recently the present writer had a vivid dream, in which he felt himself confronted with a situation which he felt to be akin to one previously faced. Even in the dream he experienced a sense of familiarity with the situation. He dreamed that he was crossing out, from the contents' page of a book he was writing, the chapters that he felt to be finished. As he did so he felt himself saying, "Now that is done and finished with. I'm rid of that." At the same time he was conscious that the chapter of the book symbolized something else. On awakening

²¹ *Interpretation of Dreams*, p. 24.

²² *Ibid.*, p. 24.

he at once reviewed the dream and began to search his memory for what it referred to. Then he clearly recalled to mind the situation that the dream brought back in a disguised way. A few days previously he had been engaged in answering letters, and in making up arrears in correspondence. The task seemed too formidable and, having made a list of his correspondents, he had deliberately struck off three names, saying more or less the words used in the dream, "now that (correspondent) is done and finished with. I'm rid of that (correspondent)." The whole thing had presented itself as a problem to him, and its solution was drastic.

Evidently the affair had made a deeper impression upon him than he realized, for the sub-conscious staged it again as a dream with a distinct feeling tone. The symbolism of the dream was not without interest. The "correspondents" were symbolized as chapters; the "writing" element remained even in the symbolism. There was also in the dream "affect," "displacement" and the "secondary elaboration" described above.

To give an example of the mechanism of a dream let us take the following example. It was the dream of a young lady whose brother was very ill, dying in fact, and who at the same time was, on account of her political views, constantly watched by secret service agents of the government. The young lady was at the time suffering from depression. She dreamt that "P. B.," an officer in the army of the government, whom she had known pretty well but

who was opposed to her politically, was dead. She was very sorry and crying. The news was brought to her *by a secret service agent*. She felt, in her dream, that she had liked "P. B." very much.

Now, as to the interpretation of this dream: "P. B." really represented her brother. It was really a dream of her brother's death, for she cared very little about "P. B." and he was a political enemy. Her dislike to the secret service agents was symbolized by their being the channel of the bad news. Her two sub-conscious fears were thus realized in this bad dream or nightmare, but in a disguised way. One, her brother's death; the other, bad news from the secret service agents. *Thus the "affect," the sorrow and crying, belonged to the real dream-thought*, the hidden, latent meaning of the dream. The "manifest content" of the dream was, as it usually is, misleading.

Maurice Nicoll writes²³ that "the dream is regarded as material of the first importance in the investigation of the factors responsible for unusual states of mind." Dr. Rivers, Bousefield, and practically all psycho-analysts regard it "as an invaluable aid in psycho-analysis,"²⁴ and in determining the intensity and depth of the psycho-neurosis from which the patient is suffering.

A patient, suffering from a mild form of agoraphobia, combined with other mild obsessions, had at

²³ *Dream Psychology*, p. 6.

²⁴ *Elements of Psycho-Analysis*, Bousefield, p. 105.

first dreams in which "failure" was combined with "flight into solitude" of some kind. Again and again these elements appeared in her dreams. In one she was playing a game but could not catch the ball, and played very badly, and finally went off alone to a house. In another she was searching for a girl friend who was sick in a hospital, but could not find her, and finally went off alone into a top-room. There were many such dreams. Then an improvement set in, and she began to get better. Her dreams now took a different turn. She began to have "successes" and to "remain with the crowd." For instance she dreamed she was playing hockey with other girls and that she played so well that the captain congratulated her. She remained with the captain after the game, putting away shoes. Then she had a dream of a dance where she did a special dance very well, and remained on dancing with other girls. The whole tone of the dreams had changed with improvement in health, and they betrayed a reawakened interest in life. Dr. Rivers noticed the same type of change in dream-imagery to accompany improvement in cases of shell-shock; and where recurrent nightmare was a troublesome symptom, the nightmares became gradually less terrifying when an improvement set in.

One important reason for studying dreams in mental and nerve cases is the possibility of some serious symptom, perhaps even a homicidal tendency, betraying itself in the dream, long before

it could come to be suspected from the external conduct of the patient. Dr. Rivers tells in full of such a discovery in the dream of one of his patients.²⁵

To sum up our views on the subject of dreams: We believe it to be the duty of neurologists to study carefully the dreams of their patients, and even to strive by means of free-associations to get at the fuller meaning of the dreams. As regards *symbolism*, it is dangerous to be dogmatic. On the one hand, no doubt the elements of the dream usually symbolize something or other, if they are not directly representative. But, on the other hand, it is too much to say that the same symbol means the same thing for different people. It may and it may not. Freudians have gone to ridiculous extremes in this matter. Dreams have no doubt a biological significance, and make for bodily well-being in some way or other. Also they have psychological significance, and are doubtless the output of the sub-conscious. That some dreams are "wish-fulfilments," such, for instance, as the ice-cream and plum-cake dreams of children, is obvious. Others are equally clearly problem or conflict dreams, in which the mind in a disguised way works on at the puzzles and difficulties of waking life. Of other dreams, some without doubt are sexual, some self-preservation dreams; in both kinds the animal instinct of man inspires the course of the imagery of the dream.

²⁵ *Conflict and Dreams*, p. 32 seq.

Lastly, some dreams are merely representative of past experiences. Our dreams betray what we are to a greater or less extent, for they show what we like and dislike, and what we worry over. Also they often betray in a clear way our abnormalities.

CHAPTER XVI

HYPNOTISM

IT IS not necessary for the purposes of this paper to recount the chequered history of hypnotism, or to describe all the strange and varied phenomena that appertain to it. Too much attention has been paid to what may be called the abnormal phases of hypnotism, and an unhealthy glamor of sensationalism surrounds what is nothing more than an instinctive reaction-state of mind and body. It will be sufficient to enumerate the most important characteristic features of normal hypnosis, with a view to discussing the meaning or interpretation of this state, and its uses in psycho-therapy.

It will be noticed that the features to be enumerated are psychological rather than physiological. The reason is that the physiology of hypnosis is still a mystery. Little or nothing is known of it. "The attempt to reconstruct hypnosis in physiological concepts," writes Claparède, "is perhaps to-day almost as chimerical as would be the attempt to reproduce the delicate traceries of the Louvre with the clumsy materials in a child's box of toys." Even if the view of the Salpêtrière school be correct, that hypnosis is a form of hysteria, artificially induced, we are still

far from a knowledge of its physiology. Hysteria itself is now admitted to be principally, if not wholly a disorder of mind, a psycho-neurosis; and the organic basis of this disease, if indeed there be any, is alike a mystery. To interpret hypnosis in terms of hysteria is to leave us still without any insight into its physiology. No doubt certain remarkable physiological results follow upon hypnotic suggestion, such, for instance, as blisters, erythemata, local anæsthesias and the like, which point to a special activity of the autonomous nervous system during hypnosis, but of the physiology of the state itself no well-established theory exists, and recourse is blindly had to "disjunctions of nerve-synapses."

On the other hand, the psychological nature of hypnosis has been carefully and fully studied. Hundreds of investigators have vouched for the well-known phenomena; lethargy, catalepsy, somnambulism, amnesia, super-normal appreciation of time-duration, post-hypnotic fulfilment of suggestions received under hypnotism, etc.; and the hypnoidal state has become a veritable laboratory for fantastic experimentation. Much work has been done, both at Paris, under Charcot, in the Salpêtrière clinic, and at Nancy under Liébault, Bernheim, Beaunais and others. These two schools, while agreeing to a great extent as to the facts of hypnosis, part company as to the interpretation of the facts. The former school, as I have said, sees in hypnosis a form of hysteria; the latter sees in it enhanced suggestibility.

A third school, taking a *via media*, and following a line of thought inspired by biology proper, sees in hypnosis a purely instinctive reaction-state of mind and body.

As a starting point for the exposition of the biological interpretation of hypnosis we must now consider some of its chief characteristics.

There are many methods of "inducing" hypnosis, but however much they may vary in detail, they all aim firstly at "immobilizing" the attention of the subject. Sometimes this is done by means of a bright light, moving or stationary; sometimes by passes, with or without contact; sometimes by slowly recurring rhythmic sounds; sometimes by staring fixedly into the subject's eyes. "All recognized methods of producing hypnosis are methods of holding the attention and so bringing about dissociation."¹ The end is always the same, though in a sense it is twofold; to hold "immobilized" the subject's attention; and to do so in a way that initiates or sets up a "rapport" or relationship between hypnotist and subject. When this is achieved a starting point is secured for ulterior suggestioning, which usually takes the form of awakening in the subject a feeling of drowsiness that deepens into a hypnoidal dreamy state, or into actual hypnotic sleep.

The first characteristic of hypnosis is *increased suggestibility*. The receptivity of the subject for

¹ W. Brown, *Suggestion and Mental Analysis*, p. 93.

the suggestions of the hypnotist is enhanced to such an extent that suggestions, even unwittingly given, are acted upon. Wingfield defines hypnosis as "a psychological condition in which suggestions are not only much more easily accepted but are also realized with an intensity much greater than is possible to the normal state."² Even if the hypnotist fails to induce sleep, and the subject remains in a conscious hypnoidal state, he is still deeply suggestible.

The second characteristic of hypnosis, closely allied to the former, is *heightened sensibility*, an enhanced sensitiveness to stimuli, not necessarily of all kinds, but at least of some kinds. "A hypnotized person," writes Dr. Rivers,³ "may become aware of, and utilize indications given by organs of sense, which produce no effect whatever upon his consciousness in the normal state." Hyperæsthesia can be produced under hypnotic suggestion, to which the well-authenticated phenomena of dermatography testify. But apart from this, even in normal hypnosis, some of the special senses seem to be exceptionally sharpened, and a kind of exaltation of sense power is observable.

The third important characteristic of hypnosis is *dissociation and suppression of experience*. As in ordinary somnambulism or sleep-walking there is a marked amnesia. In a hypnotized subject part of the contents of his consciousness is split off or dissociated. Indeed, under suggestion, the subject can

² *An Introduction to the Study of Hypnosis*, 2nd edition, 1920.

³ *Instinct and the Unconscious*, p. 102.

be made to forget or suppress large tracts of experience and, on the other hand, lost parts of experience or memory can be revived. This potentiality for re-integrating or synthetizing memory, and so curing amnesias, makes hypnosis an important adjunct of psycho-therapy.

Another common characteristic of hypnosis which merits to be taken into account is *mental inertia*, or loss of voluntary and intellectual initiative. The power to form mental associations or to make independent efforts, apart from suggestion, is inhibited. The mind apparently becomes a blank under hypnosis. It remains passive and inactive. "In Madame B. . . . at any rate," writes Claparède,⁴ "the hypnotic state was characterized by a suspension of the function of initiative. The conclusion has been drawn by other observers. We have seen that several authors, Wundt in particular, characterize hypnosis by the suspension of voluntary activity." Beaunais tells how he often asked his hypnotized subjects what they were thinking about, and he invariably received the answer, "*Nothing!*" A kind of drowsy, passive, intellectual repose seems to prevail, which one would naturally expect in a state of deep suggestibility.

To sum up the foregoing features, we find that hypnosis, starting from immobilization of attention through the agency, and under the influence of a hypnotist, is characterized by *enhanced suggesti-*

⁴ *Interprétation psychologique de l'hypnotisme.*

bility, heightened sensibility, dissociation of experience, and mental inertia. We have now to consider how far these characteristics, when grouped together, can be brought into relation with instinct, and how they can be interpreted from the point of view of biology.

As regards immobilization of attention, some simple experiments with animals show interesting results. It is well known that a hen can be thrown into a strange kind of cataleptic state *vis-à-vis* of a chalked line if its "attention" is forcibly drawn to the line by pulling its beak along it. A similar phenomenon is producible by stroking a frog on the back. It is even possible to produce a curious passive and obedient state in a cow while attracting and holding its attention by waving the hand rhythmically before its face. When an animal's attention is thus immobilized a kind of instinctive reaction of passivity results. This state is at most the beginning of animal suggestibility, and we have to turn to gregarious animal life to find something akin to true suggestibility. "Suggestion," writes Bernheim, "is the key to all the problems of hypnosis," and it is in that kind of common suggestibility which makes unity of action possible in a herd, that we are most likely to find help in interpreting hypnosis.

It has been noticed that all the units of a herd seem instinctively to know when and how to act in face of danger. They react in a way calculated to secure their individual as well as their common

safety. Only a very extraordinary sensibility to faint sense stimuli, combined with something akin to suggestibility, could give them the power to act instantaneously, all in the same way, now by flight, now by aggressive tactics, now by "lying low" and remaining absolutely still. When the herd reacts in the last way, by immobility, were even one of the number to utter a cry or to stir, the whole herd would be betrayed. But thanks to their "suggestibility," working in accord with instinct, all adopt the same tactics, and herd life becomes a possibility.

A somewhat similar condition of collective or herd suggestibility is noticed at times among a disciplined group of men, an army unit, or a boat's crew, when confronted by sudden danger. If, for instance, a squall suddenly strikes a boat, at once the minds of all are focussed on the skipper. Attention is held, immobilized. The least sign or word of the skipper is obeyed instantaneously and *instinctively*. The men seem to know, before he issues an order, what it is to be and how it is to be carried out. They become deeply suggestible. The sensibility of each is also so enhanced that he sees and hears, in spite of wind and rain, what he could not see or hear at other times. Further, each one forgets pains, aches, memories, feelings and fears of all kinds. Seldom he even remembers to say a prayer. All experience, save the present content of consciousness, is dissociated and suppressed. Each member of the crew becomes the blind and suggestible agent of the skip-

per, and ventures nothing on his own initiative. He is mentally passive, awaiting orders or suggestions. While the crisis lasts they act, if well trained and disciplined, as though the skipper were a hypnotist and they the subjects. They are in a sense collectively hypnotized, and manifest all the characteristics that mark the hypnotic state. For the herd, or for the human group in face of danger, instinctive normal reaction manifests a close resemblance to the hypnotic state.

It has frequently been pointed out that social or communal life would be impossible were we not suggestible. To walk a crowded street, or to drive through a traffic of motors, would be an impossibility were it not for a certain unconscious susceptibility to suggestion, in part perhaps telepathic, which aids us in avoiding an untold number of collisions. Instinctively we feel that this person or car is going this way, the other the other way, and without any misgivings, though at times our lives are at stake, we direct our movements accordingly. And when we reflect that the same kind of suggestibility which renders collective living possible, is at the basis of hypnosis, we find it hard to avoid inferring that there is a close connection, perhaps one of identity between the two phenomena.

At first sight it may seem hard to connect a state produced artificially in a subject, by a hypnotist, perhaps in a back parlor, with the state awakened in a member of a herd or group of men in presence

of danger. How can the former state be looked upon as a normal state of instinctive animal reaction? Well, the mechanism which in the case of the member of the herd functions as a deeply rooted biological self-protective reaction, functions in the case of the hypnotized subject in an artificial way, but still instinctively.

We clench our fists and cry aloud in dreams when danger threatens, and we do so *instinctively*, even though the danger is only imaginary. A mere hallucination can awaken as real emotional attitudes, and provoke as thorough-going physical reactions, as an actuality. That the hypnotic reaction-state can be produced artificially does not in the least militate against its being an instinctive mode of reaction; on the contrary, it should rather lead us to suspect it of being such.

"The complex hypnotic state," writes Dr. Rivers,⁵ "has arisen through the influence of certain factors which became connected with the primary states of suppression and dissociation through gregarious needs, through the needs of animals when associated together in groups. These factors are heightened sensibility, as a means of reacting immediately to sensory indications, given by the other members of the group, the heightened suggestibility as a means of responding immediately to the more complex states existing in the minds of other members of the group."

⁵ *Instinct and the Unconscious*, p. 107.

In fine, hypnotism, if this theory be correct, means that wittingly and under artificial conditions there is aroused in a subject certain instinctive reaction processes, entailing suppression and dissociation, destined by nature for other biological ends.

It is now time to say something on the uses to which hypnotism has been put in recent years. The development of psycho-therapy has been swift of late, owing chiefly to the variety and number of "shell-shock" cases and nervous breakdowns during the great war.

Psycho-analysis, in one form or another, in conjunction with auto-suggestion and hypnotism, represents the most up-to-date method of dealing with all types of functional nerve disease. Neurologists of the type of Dr. W. H. B. Stoddart,⁶ psychologists of the type of W. H. R. Rivers, William Brown, and a host of other mental specialists, have whole-heartedly accepted the new method. As a consequence, hypnotism has come more and more into vogue, and there are few nerve-specialists, if any, who do not use it to some extent. The majority are satisfied with the results to be gained from producing a merely hypnoidal state without going on to induce deep hypnosis. In regions of pastoral medicine, where there is question of slavery to vice, hypnotism has been employed with success, and it is probable that before long its use in such directions will become more common. As a method of gaining an

⁶ Cf. the 1921 edition of *Mind and its Disorders*.

insight into problems of psychology it has certain uses, and not a few of the theories of modern psychology are based on hypnotic phenomena. The doctrine of the "unconscious" mind, which figures so largely in recent writings, is to no little extent the outcome of observations gleaned from the study of hypnosis.

It is not necessary to dwell here on the remarkable effects of suggestion. "An idea can become a disease," and many of our ailments are nothing else than creations of our imagination. The mind has so powerful an influence over the body that it can seriously upset its functioning, apart from any organic lesion. But, on the other hand, the mind can undo its own bad work and can reestablish health once more. This influence of the mind, working unconsciously, is called suggestion. It implies the realization in the body of an idea, a thought of healthfulness. And so suggestion has been called by F. W. H. Myers, "a successful appeal to the subliminal," and by Charles Baudouin, "the sub-conscious realization of an idea." Sometimes we are more suggestible, sometimes less so. The entrance of an idea into the sub-conscious, to use modern phraseology, is at times easy, and at times difficult. How can we be put in an optional condition for receiving healthful suggestions? That is the problem of psycho-therapy which hypnotism has solved, for under hypnotism the subject is more suggestible.

There is an important characteristic of hypnotic

suggestibility which greatly enhances its importance as an agent of psycho-therapy. I refer to what is called "post-hypnotic suggestion." A hypnotized subject, when ordered to perform a certain act, say to stand on a chair, ten minutes after being aroused from hypnosis, will perform the act *at the correct moment*, although he has no watch to estimate time duration, and *no conscious recollection* of having received such an order. This is, of course, a very mysterious phenomenon. It has to do, first of all, with a sub-conscious appreciation of time duration, and secondly, with a remarkable dissociation of consciousness. On each of these points it may be well to say a few words, first as regards the measuring of time. Every kind of theory has been advanced in vain to explain it. Unconscious telepathy seems to be the least unlikely explanation. "In some cases⁷ the subject had no normal means of learning the time of the day for considerable periods before and after the reception of the suggestion, and yet the accuracy of the result was not diminished. What then can be made of these cases? They are too numerous, too carefully studied and reported by competent observers, to be set aside as merely instances of malobservation. The most commonplace hypothesis that seems adequate to account for them is one of sub-conscious telepathy." Somewhat akin to this phenomenon is the well-known instance of waking at a pre-determined time. The business

⁷ W. McDougall, *Body and Mind*, p. 353.

man, who has to catch an early train, is often able to awaken at, say, four o'clock approximately, without the aid of an alarm-clock. This phenomenon of auto-suggestion also indicates a remarkable sub-conscious appreciation of time duration. Animals of all kinds show a kindred power. At precisely the exact time they come to the place where they are accustomed to get food, and they seem able instinctively to estimate the duration of time. Is there some secondary sense, analogous to appreciation of extension of surface (which is due to a combination of the sense of pressure and the sense of muscular tension) that helps us in this matter? Or is it due, as McDougall says, to sub-conscious telepathy?

The second point referred to in the phenomenon of post-hypnotic suggestion is the fact, due to a dissociation of memory, that the order is carried out although it is *not remembered consciously*. Dissociation of all kinds characterizes hypnosis. A subject, under hypnotism, if told that his left eye is blind, will no longer be able to see anything with that eye. What has happened in the meantime? How is the dissociation or circumscription effected?

"The subject himself," writes McDougall,⁸ "knows nothing of the anatomy of his brain; and even if his brain could be so enlarged that all the members of the International Congress of Physiologists could walk about inside his nerve fibres and

⁸ *Ibid.*, p. 352.

hold a conference in one of his 'ganglion-cells,' their united knowledge and the resources of all their laboratories would not suffice to enable them to effect such an operation as the isolation of the sensory centres of the left eye from those of the right eye, and from the rest of the brain."

No less wonderful is the dissociation of one memory from others. In animal life we find instinctive acts of "dissociation," sometimes of a violent physical kind, as when a starfish will shake or break off one of its arms that has got entangled, or when a tadpole will rid itself of its tail. And in higher types of animal life, an apparent power of suppressing or dissociating painful impulses, a kind of auto-anæsthetizing a body region, was shown in Pawlow's experiments on dogs.

The therapeutic importance of post-hypnotic suggestion will be clear to all. If under hypnosis the subject has been made to use a hysterically paralyzed limb, and if it is suggested to him that he will use it freely and painlessly when he awakes, his cure will depend on this post-hypnotic effect. The same holds good for memories recovered under hypnosis. When it is suggested that the lost memories have been permanently won back, and that they will be present to consciousness when the subject awakes from sleep, the amnesia is cured.

The potency for good of hypnotic treatment, in the region of pastoral medicine, to which we have already referred, is a matter of the deepest import.

This potency depends also on the post-hypnotic effects of suggestions given to the hypnotized subject.

"We do find situations," writes W. Brown,⁹ "where the will is apparently powerless and the intellect useless, yet where suggestion at once succeeds in producing effects if the patient can but get into a half-waking, half-sleeping passive state of mind. Under these conditions calm and impressive suggestion does not stir up opposition. The ideas suggested tend to realize themselves, results are obtained, and subsequently — what is still more important — the patient finds he is able to use the method himself."

Sometimes, by suggestion, a loathing for the vice to which the subject is addicted can be aroused. Often this loathing lasts for a considerable time, and an opportunity is afforded the patient of pulling himself together and of acquiring a holier and nobler outlook on life.

Many moral states, closely bordering on psychoneuroses, such, for instance, as hallucinatory visions, could be treated by hypnosis with some prospect of success. Religious melancholia and discouragement could likewise be dealt with in this way. And in the sphere of sexual abnormality and perversion, many doctors claim to have effected cures by hypnotic suggestion.

In spite of the benefits which are obtained through hypnotism, in the treatment of nervous diseases, it

⁹ *Suggestion and Mental Analysis*, p. 106.

would be idle to shut one's eyes to the dangers connected with it. The desire to be able to hypnotize people is in itself a fascination for many who have studied the art, and perhaps seen it put in practice. Such a desire has led some to try reckless experiments which might easily be fraught with much danger, both moral and physical. It would be hard to exaggerate the moral danger that would ensue if friends, perhaps already sentimentally attached to one another, allowed a further hypnotic rapport to spring up between them. The feeling of domination and masterful control which awakens in the hypnotizer *vis-à-vis* of his subject would very easily degenerate into a dangerous and vicious state of soul, if passion was awakened by the circumstances of the situation.¹⁰

The employment of hypnotism in the real or make-believe devilry of spiritistic séances has introduced another element of danger. Those who are good hypnotic subjects, who are passively "psychic," are in demand as *mediums* for spiritistic practices. They can be thrown into a trance at once, and this trance-state is the starting point that spiritists, whether they be charlatans or real believers, desire. The connection, at least in non-

¹⁰ Cf. *Mind and its Disorders*, by W. H. B. Stoddart, p. 103. "It must be admitted, that for successful hypnosis, the patient must have confidence in the hypnotist; and Ferenczi has shown that this state of confident *rapport* is not unattended by feelings of a more positive kind, such as *affection, friendship, and even love*. This explains why patients treated by hypnotism are liable to develop undue dependence on their physician."

Catholic countries, is thus (though quite *per accidens*) a close one between hypnotism and spiritism — and hypnotism for some has been the road to the evils of spiritism.

But, apart from these, and other moral dangers connected with hypnotism, there are serious physical dangers also.

An unskilled hypnotizer may not be able to awaken the subject from the cataleptic or lethargic state into which he may pass. *Hence it is very wrong for an amateur hypnotizer to experiment on his friends.* He might find the subject who offers himself for such experiments to be of an extremely neurotic temperament, one who swiftly falls into deep hypnosis, and there might easily arise a serious neurosis from clumsy treatment.

There are dangers in the practice of hypnotism which even the best experts cannot always overcome. The subject, frequently hypnotized, sometimes develops a craving for the hypnotic state, and becomes dependent on hypnotic suggestion to such an extent that without it he is nervous, irritable and, perhaps, suffers from insomnia. For some it is a kind of psychical drug bringing in its train evils that resemble those following other drug habits.

For, what are called *circus-horse subjects* (those who are very often hypnotized in hospital for demonstration purposes) it is said that *the will becomes weak and the character deteriorates.* They seem to lose permanently their power of initiative and inde-

pendent energy of purpose. And, in some cases where subjects have been often made to play strange rôles under hypnosis, there seems to be a tendency to auto-suggest themselves at times into playing these rôles again, and into assuming on occasion their artificial hypnotic character.

The possibility of bringing about the commission of crime under hypnotic influence has been much discussed. Theoretically it is clearly feasible. In actual practice such crimes have occurred, but usually there seemed to be guilty cooperation between subject and hypnotizer. The former is seldom, if ever, *an innocent victim*, a guiltless unwilling instrument in the hands of an arch-fiend hypnotizer. The pages of romances are, it would seem, almost the only scenes of such crimes. Nevertheless, alarmed at the possibility of social evil and legal crime from the popularization of hypnotism, some Continental governments have rendered it illegal for unqualified and unauthorized practitioners to use hypnotism.

The attitude of the Church towards hypnotism has been that of caution. While recognizing in full the legitimacy of using physical means, which are in themselves good and useful, she has not been unmindful of the dangers connected with hypnotism, nor of the abuses associated with its practice. She has contented herself with condemning the abuses, and safeguarding the conduct of Catholics by certain wise rules for their guidance which have been formulated by the theologians of the Church. Hyp-

notism, as such, has not, of course, been condemned. The Church has left the way open for scientific research, and for psycho-therapeutic work. It is untrue to say, as some people do, that the Church has banned hypnotism. The Church has, so far, condemned only abuses, and put her children on their guard against dangers.

In a response of the Holy Office (June 2, 1840), we find the following authoritative statement, which gives the attitude of the Church towards hypnotism, although the term *magnetism* (animal magnetism) was used as being then the scientific term for the phenomenon:

“The use of magnetism, that is to say, the mere act of employing physical means, otherwise permissible, is not morally forbidden, provided that it does not tend to an illicit end, or one which may be in any manner evil.”¹¹

The conditions laid down by Catholic moral theologians for the lawful use of hypnotism are briefly as follows: (1) There must be no connection between the hypnosis and *any superstitious or immoral practice*. (2) There must be a *grave reason* to justify the suspension, wholly or in part, of the subject's reason; such as the cure of sickness, progress of science, diminution of uncontrollable propensities to vice. (3) The hypnotist must be trust-

¹¹ This response was further confirmed by an Encyclical letter of the Sacred Penitentiary Tribunal, August, 1856. A still later response from the Holy Office, July 26, 1899, adopts a similar attitude.

worthy and competent. (4) A trustworthy witness should be present.

Hypnotism is then lawful under the ordinary conditions which prudence suggests, when all is in order and above board. No sensible person would have recourse to hypnotic treatment, unless for a grave reason, nor would he approach any but a competent and trustworthy hypnotizer, one who would not be so unprincipled or so foolish as to indulge in superstitious or spiritualistic practices.

In conclusion, it may be well to summarize briefly our views regarding hypnotism. First of all, we regard hypnosis in its mild forms, as a perfectly natural, normal and fairly common state of mind and body. Secondly, we regard it, owing to its characteristic of suggestibility, as affording excellent opportunities for the treatment of many nervous disorders. Thirdly, we consider that little good results from inducing the deeper, abnormal forms of hypnosis, such as catalepsy. Fourthly, we consider that although there is a real element of danger, both moral and physical, in hypnotism unless the rules laid down by the theologians are faithfully observed, nevertheless it would seem that the danger is far less if only mild hypnosis is induced. *Lastly*, it should not be forgotten, that the whole theory of hypnotic treatment is based on the sound doctrine that mind dominates matter, and that the soul can influence beneficially the body of which it is the vital principle.

CHAPTER XVII

“THOUGHT-TRANSFERENCE AND SOUL-SPEECH”

THERE is a point where mind meets matter and sets matter in vibration. That is the central wonder and mystery of psychology. The mind, or soul, is immaterial and unextended. Matter is extended, and has nothing in common with mind. There is no meeting ground as it were, and yet they meet and inter-act. What an insoluble problem lies there!

Psychologists “soften down” the wonder of it by explaining that the matter acted upon by the mind, is “vitalized nervous substance.” And they affirm that it is specially adapted for the reception of the spiritual stimulus. But what adaptation is possible? And is not “vitalized nervous substance” just as truly matter as a piece of wood or iron?

It is idle to speculate on the manner in which mind transmits its energy, and sets matter vibrating. We must rest satisfied with the fact that it does so. We may suppose that the mind itself has its own psychic vibrations. We are forced to borrow descriptive terms of the kind from the material world around us. These psychic vibrations are, at

a point, translated into physical vibrations, and the arm is raised or the word is uttered. Can it be that "psychic vibrations" are capable, also, of acting on matter that is not vitalized — on inorganic matter, such as the ether, or some more refined substance which permeates the ether and which has escaped the observation of physicists? We do not know for certain. But such a question is forced upon us by the consideration of the facts of "thought-transference and soul-speech," which are spoken of as *telepathy*.

Communication of mind with mind, without the intermediary of sense-signs, has hitherto been known as "telepathy." But telepathy is not a good word. It has reference to *distance*, and to *passivity*. But in "soul-speech," if I may use the word, spacial relations are accidental, and there is activity as well as passivity. When A sends a mental message to B, without speaking or writing, or making any physical sign, there is "soul-speech," founded on psychic vibrations. It matters not whether A and B are near or far apart. It is "soul-speech" in either case. And it is clear that both A and B are psychically active, the *receiver* is no less mentally busy, though in another way, than the *sender* or *transmitter*.

The vibrations that are transmitted seem, according to the sanest theories, to be physical. But they are at least psychic in origin. And hence they may fairly be spoken of as psychic vibrations. The ac-

tivity springs from the psyche, and one would like to think of a term corresponding to "radio-activity," or "X-rays," and speak of "psycho-activity" or "psycho-rays." We, as we have said, are forced to seek for imagery and similitudes in the physical world.

What is the evidence for the existence of "soul-speech"? There is, first of all, the strong persuasion of its possibility, and of its existence, in all our minds. From our earliest days we have been trying little experiments of our own, and succeeding sometimes. "I'm going to make X think of me by thinking of him." How often we said that. "I'm going to make Y look at me, by looking at him and *willing* that he should look at me." And we have at times succeeded. Then there is an enormous mass of evidence as to occurrences, apparently only possible on the theory of psychic-vibrations. Yes! an enormous mass, comprising much that is startling and convincing, taken from every-day life. There are, further, the very remarkable phenomena which occur between the hypnotist and his subject, when the latter without hesitation reads the former's thoughts. I shall later on give concrete instances. The proofs, perhaps, are never as valid as mathematical proofs, but they are at least morally convincing, and few psychologists of the present day would venture to deny the existence of "soul-speech." Metaphysicians find conviction in considering what must be the nature of the inter-communi-

cation which takes place between angels (*i.e.*, pure spirits). If angels can, and no doubt they can speak to one another by psychic vibrations, why cannot we do so, to some extent at least, seeing that we participate in their spiritual nature?

The acceptance of "soul-speech," as a natural phenomenon, results at once in robbing of its mystery the facts of clairvoyance and crystal-gazing. Further, it deprives "spiritism" of very much of its glamour. And spiritists find themselves hard put to it to find "phenomena" which are not explicable in terms of "soul-speech." Even the system of "cross-correspondence," designed so as to give evidence of the reality of spiritistic facts that could not be explained by "thought-transference," is hardly a success. However, it is outside our scope to enter into a discussion of such matters.

Needless to say, there is much that is uncertain and obscure as regards "soul-speech." It occurs. That is all we can say with absolute certainty. The conditions under which it occurs are still unknown. Some states, dreamy, passive states, seem favorable for the reception of messages. Other states, when one is full of conviction, and psychically exalted, seem best for transmitting messages. The sender and receiver, when "attuned" and "sympathetic," get the best results. Results are more certain when there is physical contact, a holding of hands, for instance. Great concentration of attention, will-effort, and the formulating of the message in un-

uttered words, seem to be conditions that help. The most favorable condition of all is apparently the hypnotic suggestibility of the receiver, *vis-à-vis* of the transmitter.

Personal experiences are naturally the most convincing of all, some more so than others. On two occasions, while holding and "reading" a friend's hand, speaking under an impulse and with a strange emotional conviction, I have been able to reveal some very definite and detailed circumstances that caused extraordinary surprise. I was not guessing, but merely recounting the thoughts that I found in my mind. On another occasion, while holding the hand of a subject I had hypnotized, I put three test questions to him, and only three. He answered the three perfectly correctly. "I am thinking of a certain shop in L——. What is it?" He answered at once correctly. "I am thinking of a number between one and ten." Again he answered correctly. In the third case he answered correctly when I asked what number between twenty and thirty I was thinking of. I did not continue the experiments with this subject as he seemed to be laboring under a considerable strain when I asked the last question.

Professor W. Brown refers to the "quite astounding results" of a telepathic nature obtained under hypnosis. And it would seem that apparently indisputable phenomena¹ of soul-speaking, under the

¹ Cf. *Daily Mail*, Feb. 5, 1924. Also cf. *Daily Mail*, Sept. 9, 1922, for a similar instance.

severest tests, which Mr. and Mrs. Julius Zancig have produced, take place when Mrs. Zancig is in a hypnoidal state *vis-à-vis* of Mr. Zancig. It may be of interest to refer to the test put upon them at the National Hotel, Bloomsbury.

Mrs. Zancig was blindfolded and a black bag was placed over her head. She sat with her back to the audience. Mr. Zancig stood behind a screen which separated him from his wife. He was handed a parcel which had been prepared before the meeting by a vice-president of the Magicians' Club. Mr. Zancig was not allowed to utter a word. Someone called out, "Ready," and Mrs. Zancig spoke out and described the parcel, and according as her husband opened it, all it contained. Lastly, as Mr. Zancig silently read a message contained in the parcel, she spelt out the words of the message, one by one, correctly.

Some years ago, the Psychical Research Society held an investigation on alleged facts of telepathy, and came to the following conclusions:

1. Experience proves that *telepathy*, that is to say, the transmission of thoughts and sentiments from one spirit to another without the intermediary of the senses, *is a fact*.

2. Testimony proves that it happens so often that persons *who are passing through some great crisis*, or who are going to die, appear to their friends and their parents, or get into touch with them, that chance alone cannot explain the facts.

3. These apparitions are instances of the supersensible action of one spirit upon another.

4. We must, however, recognize that, though the proofs appear to us sufficient (so runs the statement of the investigators) they are nevertheless not striking proofs. In our eyes the existence of telepathy is proven, but the evidence is not such as cannot be dismissed as insufficient.²

As regards the second conclusion (No. 2 above) the present Lord Emly vouches for a very remarkable instance. When the late Lord Emly, his father, was dying (it happened to be at a quarter to eleven at night), he was standing by his bedside, in deep distress, and thinking of a great friend of his, a Mr. X, who was living some six miles away. At a quarter to eleven on that particular night Mr. X. was sleeping heavily before the fire, and his wife and another lady were seated close by. Suddenly Mr. X. sprang from his chair, and, to his wife's amazement, looking towards the door, cried, "Yes! Yes! I am coming! I am coming!" His wife asked him what was the matter, and Mr. X. immediately said, "Don't you see? Monsell³ is standing at the door calling me."

² Fr. Donat, S.J., cf. *Psychologia*, p. 220. In reference to certain telepathic experiments at close quarters he writes: "Aliqua experimenta facta talia sunt ut ejusmodi eventus in dubium vocari vix possint."

³ Monsell was Lord Emly's family name. "As a matter of fact," writes Lord Emly, "I called X. twice (or rather said his name twice) but not aloud. I do not know why I did so. I did so. I certainly did not say his name with the intention that he should come."

This instance is so well vouched for, and so definite in all its details, that it is very hard to deny the working of psychical vibrations over even so considerable a distance as six miles. There are cases recorded of the transmission of psychic messages and "images" over far greater distances, but the example adduced will suffice.

Without wishing to confuse the issue, it is well to bear in mind the strange manifestations of something like a sixth sense in animals. The extraordinary power that some animals have of finding out water is remarkable enough in itself. And it may be that it explains to some extent the mysterious "divining" power of some men. But still more strange are the intuitive fears and dislikes of animals. They seem to "read" character, even to read our thoughts. It is remarkable, too, how a swiftly flying flock of wild birds suddenly wheel to left or right, all at the same instant, all keeping the right level, and all avoiding collisions. We are tempted to read more into this phenomenon than "suggestion." "Suggestion" is through the intermediary of the senses. But what sense, common to each unit of a big flock of birds, suffices to bring about a simultaneous sudden wheeling to right or left? Is it a sensory or a quasi-psychic phenomenon?

The present writer has by his side a letter written to him by a pastor of Providence, Rhode Island, giving in detail an instance of a mentally sent invitation which brought two priests, on a cold rainy

day, on a visit to another priest who lived twelve miles away, and whom they rarely visited. Briefly, the story runs as follows:

About 10 A.M. on this winter morning, Father M. suddenly thought of visiting Father F. A few minutes later, Father J. rushed in and said to Father M.: "Come, let us visit Father F." They travelled together the twelve miles and found Father F. waiting for them, and laughing. "I knew you would come," he said. "I've been practising telepathy. At 10 A.M. this morning I set myself to think about you in turn and to call you out to dinner, and you see I succeeded."

If such instances are due to mere chance, it is incredible that they should happen so often. It is more sane and more conservative to attribute them to some psychic activity, however ill-understood and mysterious it may seem.

The hypothesis which seems most acceptable as an explanation of these mental messages or "soul-speech," seems to be that of physical vibrations transmitted through the physical media. Wireless telephony and telegraphy have accustomed our minds to the thought of infinitesimal vibrations being safely and surely transmitted to very great distances. The vibrations set up in the nervous system as a result of thinking are in due time communicated to all the surrounding media.

The thinking is not of course a physical act. It is a spiritual act. But thinking, while the soul in-

forms the body, involves the use of brain. Thinking then means movement and vibration in the brain-cells, and their axons and fibrillae. Such vibrations are no doubt of infinitesimal strength, but still they are objective and physical and have their effect. So much for the transmitter who thinks the message. Now, as regards the receiver of the message. In due time the vibrations reach him. His nerve-terminals are affected, and ultimately his brain-cells. The difficulty now is how to explain the translation of vibrating brain-cells into a definite thought, corresponding to the thought of the transmitter.

Let us suppose that the image or representation "pomegranate" leaves a mark, a physical mark, on a certain brain neuron. In the brain of A the sender, and B the receiver, there is such a "pomegranate" neuron. Vibrations have been sent out from A, starting from this neuron. They have a certain frequency and amplitude. Now, when they reach B's brain, the "pomegranate" neuron is vibrating along with all his other neurons. Why, however, should the image "pomegranate" spring into consciousness rather than some other image? This is surely a mystery, and its solution will remain as difficult as that of the mode of action of the psyche when it sets matter in motion by its psychic vibrations.

Other hypotheses are of a more purely spiritual kind, and touch on the subject of ectoplasm. It is easy to formulate such hypotheses, but impossible

to substantiate them. A reaching-out of the soul, a mingling of mind with mind, would solve the problem of "soul-speech," but how are we to conceive such activity? Pure spirits are probably capable of such psychic activity. But our souls are united to our bodies, as their "substantial forms," and seem not to quit the body unless in death.

Some apparently "telepathic" occurrences can of course be explained by the psychic parallelism between two minds, that have been educated alike, and that have been attuned harmoniously by common tastes, occupations, and exchange of ideas. Two friends living in sympathy will often have identical thoughts simultaneously. Both will perhaps start at the same instant to speak of the same matter. Both react alike to similar stimuli. And it is well known, in the case of twins, that both suffer similar emotional crises. But such psychic parallelism fails to explain more than a small percentage of the instances adduced to prove mental speaking.

At the International Congress of Psychical Research, held in Warsaw in September, 1923, Professor H. J. F. Brugmans, of Groningen University, indicated a method of experimentation on thought-transference, which produced remarkable results in his laboratory. Very briefly his method was as follows: The "*receiver*" was encased in a dark wooden box, with his arm alone freely protruding through a hole. His hand rested on a wooden frame

bearing numbers from one to forty-eight. He could not, of course, see the frame or the numbers, but he could move his hand freely. From above the "*transmitter*" watched his hand moving and directed the hand by a thought-message to a particular number, where, if the experiment proved successful, the hand rested. There was only one chance in forty-eight that the experiment should succeed if chance alone were responsible. As a matter of fact, in some instances over fifty successes were recorded in a series of one hundred and fifty trials.

At Paris, René Warcollier has had remarkable results with his "Committee for Telepathic Studies," and at Harvard and Columbia Universities very interesting and original experiments have been conducted. It is to be noted, however, that experimenters agree that the telepathic gift is rare. A very small percentage of persons possess it to any considerable degree.

As to the future of the art of "*soul-speech*" — for we regard it as a purely natural art — we can only await the results of further researches. We think that it is well within the bounds of possibility that "the gifted ones," in "heaven-sent moments," will be able to communicate with their friends when the secrets of these psychical phenomena are laid bare. But we doubt that the art will ever become so vulgarized as to replace ordinary methods of intercourse.

CHAPTER XVIII

EDUCATION AND AUTO- SUGGESTION

I N THE course of treating patients suffering from psycho-neuroses, when one is searching among past experiences for the origin of the trouble, one frequently finds that the seeds of the mental disease were sown in the schoolroom. Indeed, it would not be too much to say that almost half of the nervous breakdowns that occur are due to experiences of school life.

There is, however, another point of contact between psycho-therapy and modern educational systems that constitutes in itself a serious criticism of the latter. As we explained, in a foregoing chapter, a certain psychical reeducation is an essential part of the cure of nerve cases. This reeducation is naturally greatly facilitated if the patient has literary tastes, and a love of learning. But it is unfortunately true that a neurologist can rarely count on the presence of "love of learning." He finds, on the contrary, a veritable phobia for serious study of any kind. And he often finds himself commenting severely on the failure of educational systems to implant that love of learning which, as

Sir John Lubbock wrote, is "better than learning itself." Now, why is it that so many nervous breakdowns originate in the schoolroom?

In general, it may be said that psycho-neuroses are caused by the coincidence of two factors, nervous exhaustion and shock. The nervous exhaustion may be due to physical or psychical causes. The shock may be an isolated experience, or the accumulation of many painful experiences. Let us dwell for a moment on these factors, in so far as they apply to school life and the schoolroom.

Boys and girls in a class have, day by day, long hours of study, under a tedious and galling restraint. They have wearisome and distasteful tasks to perform. They are caged in, together, in an unnatural way. Their life in the class-room is, to say the least of it, anti-biological. Fresh air, freedom of movement, healthy distraction, indulgence of the "play-instinct" and the "ego-urge," are all curtailed. They have not half the experiences of "the young animal" which is their due, in virtue of their nature which is animal as well as rational. Their biological needs are not sufficiently taken into account. Painful and tedious experiences are theirs, instead of the pleasurable experiences they crave for. They grow tired, sick of heart, uninterested. Their nervous energy runs out. It may well be, too, that many of them are not properly fed. Many of them likewise suffer from time to time, from minor ailments. The year goes on, the strain of

work grows, the excitement of examinations uses up their energy, the fatigue curve mounts, and finally many are on the brink of nervous exhaustion.

Meanwhile they experience shocks of various kinds. There are home troubles. There are school failures and disappointments and punishments. There is the "chaff" and often the cruel bantering of their fellow-pupils. There is sarcasm, anger and criticism from some of their teachers. Then, too, they may be passing through the period of puberty, with its moral and nervous strain. In fine the "shock" factor is almost sufficient to cause a psycho-neurosis, given their debilitated nervous condition. If any extra shock is added, whether it be a physical accident, or a fright, or an unjust punishment, or a painful emotional experience of a moral kind, the line may be passed and the psycho-neurosis may take root, at first in a hidden way. And this will happen all the more certainly if the pupil is predisposed by heredity or still earlier experiences, to nerve trouble. We see then that, under the existing, un-biological methods of education, it is only to be expected that nervous breakdowns should occur. But let us press the matter further.

There is perhaps one factor which would serve as a protection in such circumstances, if only it were present, and that factor is a pleasurable, instinctive love of learning. If lessons were really interesting, agreeable, even delightful, then the schoolroom would cease to be a breeding-ground

of nerve disease. But are lessons often of this kind? "Studia hilaritate proveniunt," Pliny wrote; "Studies go ahead where there is gaiety," but this is forgotten. "Her ways are ways of pleasantness," we read in the Book of Proverbs about wisdom, and elsewhere we read: "A merry heart doth good like medicine; but a broken spirit drieth the bones," but this too is forgotten. "Nature herself indicates the true system," wrote Sir John Lubbock, "if only we would but listen to her . . . children will profit little by lessons which do not interest them." But we go on insisting on teaching tedious things in tedious ways, and in forcing our pupils during school hours into abnormal mental attitudes.

And, what is worse, not content with straining and tiring the conscious mental activities of the pupils in this unnatural way, we suggest to them by all the arts in our power, that learning is unpalatable. We make them, by their own auto-suggestion, form in their sub-conscious minds deep, instinctive dislikes for study. Instead of winning their sub-conscious minds over to a love of learning, we do the reverse. The "school hours" are contrasted with the "recreation hours" on notice boards. Work is put in opposition to pleasure and enjoyment. At once the sub-conscious of the pupil is suggested into regarding work (learning) as painful, and non-work as pleasant. A pupil forgets his lesson, or makes a miscalculation. He is blamed and perhaps punished. He sees no moral fault in

it. It was merely a natural defect of attention or of mental functioning. But now he is auto-suggested into discouragement, for he sees it was his nature that was blamed.

Teachers are, of course, told that they must *interest* their pupils. But it is not easy to do so. In order to interest a person, you must make a successful appeal to the very depths of his mind, to the ramifications of his instincts, and to the gross mass of his experiences, likes and preferences. You must, in fact, make a successful appeal to his subconscious. And that is suggestion. A logical demonstration that a thing is "interesting" will not make it interesting. "Interest" is an equation between the personality of the teacher and the subconscious minds of the pupils. The teacher, if he has it in him, if he has that telepathic power that can send mental summonses to the mind-depths of others, will be able in a few words, or even by a look or gesture, to evoke interest. If he has not that power he will not be able to do it—he will not be able to make successful appeals to the subconscious minds of others, but nevertheless he can, by art, especially by the art of suggestion, do much. He can help to get pupils to auto-suggest themselves into interest and attention. The chief use, then, of auto-suggestion in the schoolroom should be to awaken a love of learning, and a pleasurable interest in it. Encouragement and sympathy will foster this love. And if due attention be paid to the fatigue

curve of the class many ills can be avoided. But to goad a tired class into work, is worse than cruelty, and it is the very reverse of education.

One of the tests of a good educational system is the rendering of the pupils' minds fertile in bright ideas. The boy who, as a result of his education, can produce new and fresh thoughts, and even brilliant plans and inventions, bears testimony of the highest kind to the education he has received. Now, when we examine into the origin of bright ideas, we find that they spring up of themselves from the unconscious depth of the mind. The cleverest witticisms, the most touching pieces of eloquence, the most ingenious inventions, are always sudden emanations from the sub-conscious. They are due, therefore, to free and easy mental activities that go on within the mind, away from all awareness of them, though, of course, they are indirectly evoked by conscious reflection and study. Now, if it be that the best thoughts of the mind are not due to constrained thinking, but to unconscious thinking, it is obvious that every possible encouragement should be given to the latter. And how can this be done? Is there any method by which the unconscious thinking activities of the mind can be fostered? There seems to be one way, and perhaps one way alone, and that is through auto-suggestion. When a pupil gains confidence and tells himself in his own mind that he likes thinking and that he can think well, he is auto-suggesting himself into un-

conscious thinking. It should be the part of the teacher, then, to give every kind of encouragement to pupils, so that they may gain this kind of confidence in their mental powers. A skilful teacher will use suggestion in this matter to great effect, and do untold good to the pupils. But, on the other hand, if education is along the old unbiological lines of restraint, repression and coercion, then, to put it colloquially, the sub-consciences of the pupils "don't get half a chance," and they will produce little else save phobias and obsessions.

"Suggestion is not everything," wrote Bernheim, "but in everything there is an element of suggestion." Certainly in everything a teacher says and does, in presence of those hyper-suggestible beings, called boys and girls, there is suggestion telling for their welfare or the reverse. While suggested courage does good, suggested discouragement does no end of harm. Often it happens that an impatient teacher will tell a child: "You will never be able to sing a note" or "You will never be able to do sums." Such foolish reprimands may do great harm. The child will suggest itself into the state of not being able to sing, or to do sums, and may become a confirmed idler.

To put the matter in another way: Schoolboys often say that they "*are too lazy to do so and so*," in reference, perhaps, to the reading of a well-written biography outside of school hours. And, as a matter of fact, they feel an "ennui" attitude toward

such reading; they feel really *lazy* about it. What lies beneath this real or imaginary sense of fatigue or laziness? When we say we are "too lazy" to do something, we are saying, "*We don't want to do it.*" We are never too lazy to do what we want to do, what we have a craving or a taste for. If we like to do a thing, we are not too lazy to do it.

The "laziness" that subjectively inhibits boys from working is lack of interest, lack of confidence in competency, and ultimately lack of encouragement. This lack of interest, etc., can be remedied by auto-suggestion alone. The boy should be helped to work up in his sub-conscious such a "will to learn" that he would rarely or never feel that kind of laziness of which we have been speaking.

A point of view that is often lost sight of by educators is that the faculties of mind, memory, imagination and reasoning power which they are engaged in training, are purely natural faculties; natural in the same sense as the powers or faculties of jumping, swimming or singing, and this being so, the former faculties should, *mutatis mutandis*, be trained in the same spirit as the latter. Now the faculties of jumping, swimming, singing and so forth are exercised and trained in a pleasurable way, under agreeable and enjoyable conditions. Delight and training go hand in hand in games and even in well-planned choral exercises. But in the case of the mental faculties the training has more often the accompaniment of pain. "We should never,"

writes A. C. Benson, "expect a boy to become a good player at any game unless he enjoyed it, and how we dare exclude enjoyment so rigorously from our system of education is one of those mysteries that it is difficult to fathom." And he goes on to point out that the consequence is a deplorable lack of love of learning. "The result is that we send out from our public schools, year after year, many boys who hate knowledge, and think books dreary" (*The Schoolmaster*, p. 64).

To sum up the foregoing pages. It seems that in our schoolrooms are sown the seeds of nervous breakdowns. And further, our present educational systems fail to awaken a love of learning. The cause seems to be that the systems are unbiological, and that they do not sufficiently take into account the natural instincts and the partly animal nature of the pupils. A further want is the more skilful application of suggestion, and the more enlightened fostering of those natural processes of mind which go on beneath the threshold of consciousness. As regards moral training we have said nothing. In our Christian schools due attention is usually but not always paid to this all-important matter, and unfortunately many psycho-neuroses are also to be traced to insufficient or misleading instruction and training in moral matters.

CHAPTER XIX

FALSE THEORIES OF RELIGION

IN THE course of this work we have paid tribute more than once to the value of the therapeutic methods of the New Psychology, and we have readily admitted the skill and industry of modern psychologists in analyzing and classifying mental phenomena. Their successes are due to their enterprise in experimentation, and to their keenness and diligence in observing the processes of normal and abnormal minds.

But their work, especially that of Freudians, is marred by reckless and unscientific theorizing. This fault is particularly in evidence in the wild and impious theories of religion that we find in the works of Freud, Brill, Tridon and others. It would be best to pass over such theories in silence were it not for the fact that they have been popularized, and have led many astray. The specious and plausible exposition of these theories makes it difficult for Christians who have not had a scientific training to refute them, and hence it seems advisable to deal with them, and point out how ill-balanced and unscientific they are.

The two chief theories, designed to explain away religion, the one in terms of a mental process, the

other in terms of a primitive instinct, are as follows: *The first theory* rests on the fact that the mind instinctively tends to find a solution, true or false, of its conflicts. It seeks to attain peace and satisfaction by creating, as in dreams, a hallucinatory fulfilment of its wishes, if it cannot find it otherwise.

The mind, then, seeing itself to be incomplete, isolated, helpless *vis-à-vis* of the future creates or “*projects*” the idea of God. “It *projects* the idea of immortality, to compensate for the obvious inequalities and defects of this world. It *projects* the idea of a Saviour to satisfy at once its own sense of shortcoming and its consciousness of impotence to deal with it. It *projects* the idea of sin, because of its own failure to respond completely to the voice of the herd. Various conceptions of the nature of God are due to the various needs of the herds which hold them: ‘God always stands for what is felt to be in the interests of humanity.’¹ Finally, Christian apologetics is the supreme example of rationalization, the *post factum* manufacture of ‘reasons’ for belief based on instinct and propagated by herd suggestion.”²

At first sight this “difficulty” may seem puzzling, but it is merely a restating of the position of universal scepticism. If the mind can project an idea and must inevitably regard its own projection as an

¹ Tansley.

² *Recent Psychology and the Christian Religion* (Allen & Unwin, London, 1923), p. 118.

objective fact (being without the means of testing objective validity), there is an end to all science and certitude. Not only does religion go, but history, architecture and our certainty as to the existence of Japan and the great seas go. Everything may be a "projection." Further, it should be noted, that among religious facts, some cannot be explained by the mind's tendency to "project" what is calculated to tell for peace of mind. Why should "hell" be "projected"? What wish-fulfilment is satisfied by "hell," or indeed by the punishment of sin, or judgment after death?

There is no doubt that in dreams and in abnormal states the mind tends to "project" and conjure up visions in which, for the moment, it believes and finds relief. But such visions or dreams yield at once to the test applied during normal moments or when awake. They have no foundation of a historical kind, whereas the ultimate basis of religion is historical. As Reverend Cyril Hudson writes,³ apropos of this wild theory: "Christian experience cannot legitimately be isolated, either for criticism or defence, from the events in which it is rooted. The Christian life does not arise spontaneously and *e vacuo*, and the psychologist must consider its roots if he is to appraise its fruits: he must face the question, "What think ye of the Christ?" No man, seeking to formulate a philosophy of life, can afford to ignore relevant facts: no teacher is justified in

³ *Op. cit.*, p. 120.

offering a philosophy for the world's acceptance which flagrantly ignores relevant facts."⁴

The second theory is even more impious than the first. It describes and explains religion as a *sublimation of the sex-instinct*. The theory is "softened" somewhat by broadening the term *sex* so as to include feelings and emotions of a nobler tone than those merely concerned with what is physiologically sexual, but such "softening" only deepens the libel on and the insult to human nature.⁵

This blasphemous theory has, unfortunately, made its way into current literature. Hints and innuendos inspired by it are dropped here and there. Religious ritual is likened to pagan orgies. Devout and pious believers are described as neurotic, and in a veiled way it is suggested that they are homosexual. Heaven is spoken of as a disguised sex-dream. Religious symbols are spoken of as *phallic*, and so forth. And the promulgators of this gross materialism do not hesitate to boast that Christians are afraid to face and answer the so-called "difficulty."

Once more, let us say, that were it not for the

⁴ Further criticism of this theory will be found in our criticism of "the sex-theory" of religion.

⁵ Cf. *The New Psychology and the Preacher*, by H. Crichton Miller, p. 193, re Mr. Theodore Schroeder's views. "His theory can be summed up in two statements. First, that *all religion is a misinterpretation of sex feeling*. Secondly, that *religion is therefore completely discredited* . . . (Mr. Thouless, of Oxford) does not deny (indeed he emphasizes) the importance of the facts Mr. Schroeder brings forward.

fact that many are puzzled or led astray by this theory, we should not consider it worth while dealing with it. Those who assert, like Freud, Brill and Tridon, that religion is nothing else than "sublimated sexuality" are saying a thing, not only gross and blasphemous, but also stupid and unscientific from the psychological point of view. As it is with the psychological point of view that we are dealing, we will content ourselves with pointing out the bad psychology contained in this theory.

We shall examine firstly what "*religion*" is, and secondly what "*sex*" is, chiefly from the psychological standpoint, and we shall consider how far, if at all, the sex instinct enters into religion. It will then be clear how utterly inadequate "*sex*" is to explain "*religion*."

Religion, from its derivation and primitive notion, means a "binding to God." This "binding" in rational creatures is a "voluntary subjection to God." It implies the recognition of a Divine Personality (in and behind the forces of nature), who is the Lord and Ruler of the universe. "In the highest religions this Supernatural Being is conceived as a Spirit, one and indivisible, everywhere present in nature, but distinct from it."⁶ In every form of religion is implied the conviction that the mysterious Supernatural Being (or beings) has con-

⁶ Cf. Article on "Religion," in *Catholic Encyclopedia*. For the moment we are treating of the historical and anthropological aspect of religion.

trol over the lives and destinies of men. There thus arises, in the natural order, a sense of dependence on the Deity and a deeply felt need of divine help. Combined with man's feelings of dependence, helplessness and fear, there arises a feeling of hope, and man is led voluntarily by this hope (sometimes too by fear), to perform acts of homage so as to propitiate the Deity. "What man aims at in religion is communion with the Deity, in which he hopes to obtain his happiness and perfection, and through faith he believes he can do so. In Christianity, communion with God implies spiritual perfection of the highest possible kind, the participation in the supernatural life of grace, as the children of God." ⁷ Desire of happiness, fear of punishment, sense of duty arising from the recognition of God's sovereignty, together with love of God, the Supreme Good, are the chief motives impelling man to do homage to God and practice religion. Religion is essentially a personal relation; the relation of the creature and subject to his Creator and Lord. It is a voluntary turning to God, an act of reason and will, in fine a virtue, defined by St. Thomas as "the virtue which prompts man to render to God the worship and reverence that is His right." On its subjective side, religion implies the disposition to acknowledge our dependence on God, calling into play the reason and will as well as the memory, imagination and emotions. On the objective side

⁷ *Ibid.*

there is the voluntary acknowledgment of dependence on God, through acts of homage. Religion is not the exercise of any one particular faculty, nor is it mere ritual, nor mere ethical conduct. It embraces the whole complexus of man's relations to God. It is not the mere "perception of the infinite" (Hegel), nor a "determination of man's feeling of absolute dependence" (Schleiermacher), nor "morality touched with emotion" (Matthew Arnold), nor "the earnest direction of the emotions and desires towards an ideal object recognized as of the highest excellence and as rightly paramount over selfish objects of desire" (J. S. Mill); much less is it "the mere unfolding and sublimation of the sex-instinct" (Freud). It is based on reason and will, not merely on instinct, emotion and perception. And the God towards whom religion is directed is not a mere "subjective projection of the mind," but is the source and author of all being and reality.

Now the psychology of religion studies the different psychical states implied in and associated with religious consciousness. It regards these states as "natural phenomena," for it is completely beyond its scope to deal with the supernatural. It prescind from the supernatural without denying or affirming its presence. It does not aim at interpreting these states, but merely analyzes and classifies them. It concerns itself with the normal as well as with the abnormal exercises of intellect, will, emo-

tion and imagination, set in motion by religion. It studies "visions," "levitations," "stigmata," "conversion," "religious enthusiasm," and all the phases of mysticism, from the same natural point of view. And it is well within its scope to determine how far, if at all, the sex-instinct plays a part in religion.

Let us now examine *what sex and sex-instinct* are. The tendency to reproduction, and to propagate the species is found in all forms of animal life and plant life, high and low. But it is of the instinct as it exists in the human race that we are treating. The sex-instinct is innate, inborn, in every member of the human race, and its presence guarantees the continuance of the race. Its object or purpose is *limited and definite in scope*. That is the first point to notice. It is aroused by a circumscribed complexus of stimuli, and is concerned with the present, *hic et nunc*, relationship to another member of the race of an opposite sex. The stimuli are normally physical and sensible; the relationship is of the same nature. That is the second point to notice. The third point that should be borne in mind is that the sex-instinct is only *one of many instincts and it occupies a subordinate position*. It is subordinate to the self-preservation instinct, and is dependent for its exercise on the general health of the body and on the integrity of the bodily organs.

Further, beyond question, in those who are normal, and untainted by any hereditary disease or by evil

personal habits, the sex-instinct is subject to the control of the will for its exercise. And in those of heroic virtue it can be so crushed and deadened that its presence ceases to be felt.

The feelings and emotions connected with sex are of a specific kind as are the physiological reactions that accompany them. The complexus of physical and psychical phenomena connected with sex are in a class apart, and easily distinguishable from those accompanying other instincts. As regards intensity, duration, frequency of occurrence, such phenomena are subject to definite laws. The scope of sex is, as we have said, distinctly limited, and to attempt to reduce all human activities to phases of sex-life is simply absurd. Sex is not an instinct which inspires all the yearnings of the human mind. There are spheres of activity, fields of pleasure and happiness, scales of values, in which sex has no part whatsoever. Sex cannot explain all the phenomena of the mind, else it would have to be the explanation of its own subordination to other instincts and powers. The mind does not draw its energy from sex, for the mind can be active before the sex instinct is awakened, and can remain vigorous even in old age, when the sex instinct is virtually dead. Least of all can sex explain the highly rational and spiritual activities, that, as we have seen, characterize religion. Sex has to do with the sensible, the material; religion with the super-sensible and immaterial. In fine, as the Reverend

Cyril Hudson writes,⁸ "the psychologist who equates religion and sexuality can only maintain his thesis by ignoring a large number of relevant facts, by entirely discounting the evidence of religious experience, by treating as irrelevant the essentially historic origins of the great religions of mankind, and by simply ruling out of count the conclusions of ninety per cent of the experts in his own department of science." In what sense do the psychical phenomena of religion find an explanation in the phenomena of sex? *Love* plays a part in religion as in sex, but in religion it is the rational desire and striving after spiritual good, in sex it is the bodily, sensible, cravings for physical pleasure. *Fear* too plays a part in both religion and sex, but in religion the fear is of eternal punishment, and the anger of God, that awaits the sinner after death, in sex it is the fear of physical aggression during life. Religion deals largely with the future life, life after death, and our relation therein with the Supreme Spirit, God. Sex deals solely with this life, and with physical relations with other human beings. Sex has to do with sense-desires, and sensible, animal volitions. *Religion deals with eternity; sex with the present time.* And sex can no more seek or find its satisfaction in eternity than hunger can seek or be satisfied with algebra.

It is true, of course, that sex plays a very big

⁸ *Recent Psychology and the Christian Religion* (Allen & Unwin, London, 1923), p. 110.

rôle in life. Not a few social institutions, dances, revues and promenades where gaudily dressed people assemble, are due more or less to the working of the sex-urge. Sex, too, inspires certain classes of books, plays, pictures, mythologies and so forth. Much business turns on matters connected with the sex-instinct, and to a greater or less extent it absorbs the minds of men. Hence it is that the saying arose, "Love rules the world," love being taken even in its less noble sense.

But on the other hand, it would not be hard to show that in a truer sense "lust for gold" rules the world. "What dost thou not drive the heart of man to, thou accursed lust of gold," wrote Virgil. For every one institution, social or otherwise, that owes its foundation to the sex-urge in mankind, there are ten that owe their foundation to "lust for gold." And if Freud cynically and stupidly reduces religion to the sublimation of the sex-urge, there are others, equally cynical and indeed no less stupid, who reduce it to greed for gold. Professor James, in an amusing critique of the sex-theory of religion,⁹ wrote: "Why not equally call religion an aberration of the digestive function, and prove one's point by the worship of Bacchus and Ceres? . . ."

In fact one might almost as well interpret religion *as a perversion of the respiratory function*. The Bible is full of the language of respiratory op-

⁹ Cf. Chapter "Religion and Neurology," in *Varieties of Religious Experiences*.

pression. "Hide not thine ear at my *breathings*"; "My *groaning* is not hid from thee"; "My heart *panteth*"; "My strength faileth"; "My bones are hot with roaring all the night long"; "As the hart panteth after the water-brooks, so my soul panteth after thee, O my God." And to develop his fanciful theory, in ridicule of his adversaries, Professor James refers to the fact that *inspiration* and *expiration* are part of the prayer exercises in some Eastern religions.

The fundamental fallacy which inspires the Freudian sex-theory of religion is the identification of sense-knowledge with intellectual or conceptual knowledge, and of sense-desires with the rational desires of the spiritual will.

These two classes of knowledge and conation are essentially distinct. Animal or sense knowledge is incapable of "understanding"; it does not attain to the essentials or nature of things; it is unable to grasp relationships or to have abstract and universal ideas. Sense knowledge deals with what is material, individual, concrete and tangible. The two types of knowledge have little in common. Now a "religion" depending solely on sense knowledge and sense desires might, possibly, be due to sex-sublimation. But a religion based on rational knowledge and rational desires and concerned with truth, goodness, the immaterial and the eternal, could not possibly be due to sex-sublimation. The senses do not crave for immaterial things. The mind does

desire immaterial good. Religion is of the mind and will. Sex is of the senses. Between the two spheres there is an impassable barrier. The pagan idea of a god of love, Venus, who from time to time visited the earth and sinned with men, was incorporated into their religion, understood objectively. The individual pagan, believing, if indeed he did believe in Venus as a god, and worshipping her, by performing immoral rites, could nevertheless distinguish between *the idea of religion* and *his loose practices of worship*. Such worship, although it was inspired by ill-conceived religious motives, did not constitute religion. It accompanied it, but was not essential to it. Superstitious practices at times accompany the practices of religion, but they do not constitute religion. It was not his sex-urge that created for the pagan his religious ideas. The mind element, in his religion, was not due to sex. There was, even in his degraded rites, something over and above, something higher, not attributable to sex. Hence even the sincere worship of Venus, among pagans, could not be justly described as sex-sublimation. Much less, of course, could the true and pure worship of the great Omnipotent Spirit that rules the universe, be due to sex-sublimation.

Lastly, let us deal with some of "*the points*" made against religion by Freudians. We shall, first of all, briefly summarize them, and then deal with them in turn. Freudians point out that scenes of debauchery, and lascivious dances make part of

religious ceremonies, among primitive peoples, and they point to the sexually exciting nature of certain ceremonies, pictures, perfumes, music and lights, connected with rites of higher religions. They point, too, to the sensuous imagery and language used in sacred and mystical books. They maintain that religion finds its chief votaries among neurotic and psycho-sexual people. They find in penance, mortification, strict discipline and the emotional ecstasies of contemplation certain phases of sex-perversion, such as sadism, masochism, and auto-eroticism. They see in the community life of celibates, monks and nuns, veiled homo-sexuality. They pretend that heaven is a disguised sex-dream, and that religious symbols, from the "ichthus" to oval-windows, are sex-symbols. In fine, they contend that "religiosity" and "devotion" are nothing else than sexual emotionalism in a refined form; that the universality of religion is due to the universality of the sex-urge; and that religion in general, with its rites and practices, is nothing else than the creation of sexually excited imaginations.

These "points," it will be noted, deal mostly with *the externals of religion*; rites, practices, words, symbols and devotees. They are a collection of arbitrary interpretations and have no logical value. *Cricket*, with its bats, ball, wickets, white-gowned umpires and "neurotic" devotees, could similarly be attributed to the sex-urge; *baseball* still more so, or the cult of submarines. For is not a "sub-

marine" also sexually symbolic? Therefore, is it not a "projection" due to the sex-urge?

However, let us take the points made by the Freudians in turn. Firstly, it is true that scenes of debauchery and lascivious dances make part of primitive religious rites, but unfortunately such scenes are to be found in connection *with every human practice*, business, warfare, mining, scientific research, education, and government. Does it follow that "warfare" or "mining" are *ipso facto* "sublimated sexuality" because here or there lasciviousness has crept in? Surely not. Then why should its presence in the religious rites of uncultivated peoples prove that all religion is sublimated sexuality?

Again, it is true that some of the accidentals of ceremonies, perfumes and lights and music, are sexually exciting *for some neurotic members of congregations*, but the great majority of people are utterly insensible to such abnormal effects of stimuli designed for quite opposite purposes; namely, the inspiration of holy feelings and thoughts. In any case mere physiological excitation does not, *ipso facto*, negative a religious exercise which is in the mind and will, and not in the body.

As regards the votaries of religion being "neurotic," it is true that neurotic and epileptic folk are naturally attracted by the emotional richness of religion. But neurotics, epileptics, and psycho-sexual people make up a very

small percentage of those who practice religion. Neither are they its chief votaries. They are too inconstant of purpose and changeable to be, as a rule, life-long votaries of religion. One finds amongst religious people many who are calm, of steady nerve, of cold, penetrating mind, and of iron will. When Freudians identify penance, mortification and strict discipline with sexual abnormality they become simply ludicrous. Self-inflicted pain, in a moment of mad sexual excitement (masochism), is *toto coelo* different from the daily practice of fasting, early rising, obedience, humility, prayer, "hair-shirts and chains" of fervent religious. Sadists and masochists seek for a life of softness, ease, self-indulgence, with wines and drugs and all the adjuncts of sensuality. Languor, indolence and sense-gratification, gained at times of excitement by inflicting or suffering flesh-pains, is their ideal; not labor, prayer, watching and fasting, year in and year out. Antony of the courts was a different man from Antony of the desert, and the safeguards of the community life of celibates, with its rules of silence, early rising, poor fare and hard work, are designed to render possible to frail human nature the highest ideal of chastity. Nor is "heaven" a sex-dream, at least as conceived by Christians. Christ has told us that there is no marrying or giving in marriage in heaven. Heaven is conceived as being a fulfilment of man's biggest and deepest desires, the desires of his rational nature

for truth, goodness and perfection in God. A horse being driven home after a long journey would no doubt (if it could think in that way) imagine that its master was going to have a splendid bucket of oats and bran, and a fine armful of hay for his dinner when he arrived home. He would picture his master's desires and appetites in terms of his own, and this is just what Freudians do, in the matter of sex. They picture the desires and yearnings, the heaven-wish, of Christians, in terms of animal sexual cravings.

As regards the "symbols" of religion, said by Freudians to be sexual, little more need be said than that such an assumption is perfectly gratuitous. If an oval window can be seriously considered as typifying some sex-organ, what kind of structure is to be found in any direction, that cannot be looked upon in that way? It is true that in the Sacred Books and in works on myticism, there are passages full of love-imagery. But these books are written for man, in terms of man's passions and experiences. Just as fear, anger, humiliation and suffering are appropriately described, in appropriate terms, the yearnings of the human heart are appropriately described in the imagery of love in the Sacred Books.

We have dealt at length with the Freudian sex-theory of religion, not, as we have said, on account of any inherent subtlety or difficulty in it, but because it has been spread broadcast in books and has led many astray. It is, from first to last, a

narrow, unscientific theory. It does violence to psychology, history and common-sense. It is, moreover, stupid and degrading. It would reduce mankind to a sub-bestial tribe of beings, so infatuated with sensuality and so disgustingly hypocritical as to elevate the indulgence of their lowest instinct into a holy and sacred pursuit. In fine, it is a theory which makes a mockery of God and man; it mocks God by making Him a mere symbol, and man by making his intellect the degraded slave of his senses.

GLOSSARY

A

ABREACTION. (*Catharsis* — “cleansing.”) The process of discharging repressed or “bottled-up” emotions connected with painful past experiences.

ABULIA. Form of mental derangement in which the will-power is lost or impaired.

ADRENALIN. Substance secreted by two glands situated close to the kidneys. In emotional excitement the amount of secretion is increased.

AEROPHOBIA. (*Acrophobia*.) Fear of high places.

AFFECT. Agreeable or painful sensory feeling. A general condition of consciousness.

AFFERENT. Term applied to nerve fibres leading *to* the central nervous system. *Sensory* fibres are *afferent*. Nerve fibres conducting impulses to the muscles *from* the central nervous system are *efferent*.

AGORAPHOBIA. Fear of open spaces.

AMBIVALENCE. The experiencing of opposite feelings and emotions at the same time; such as love and hatred for the same person.

AMNESIA. Loss of memory; usually an hysterical symptom.

ANAESTHESIA. Loss of sensation.

APHASIA. Loss of the ability to speak.

APRAXIA. Loss of power to perform previously learned, habitual acts.

ARITHMOMANIA. The impulse to count.

ARTERIOSCLEROSIS. Hardening of the arteries.

ATAXIA. Loss of power to coördinate movements.

ATROPHY. A wasting away; *e.g.*, of tissue.

AUTO-EROTICISM. Self-gratification of a sexual character. Fixation of love on self.

AUTO-SUGGESTION. The sub-conscious assimilation of an “idea” together with the yielding to its influence.

B

- BIOLOGY. The science dealing with life, its various forms, conditions, etc.
- BIOTIC. Pertaining to life.
- BISEXUALISM. Equally attracted by both sexes. Psychically hermaphrodite.

C

- CATHARSIS. (Cf. *Abreaction*.)
- CATALEPSY. A sudden suspension of consciousness, with muscular rigidity. May be induced by suggestion during hypnosis.
- CELL. The unit from which living tissue is built up. It consists of a cell wall, protoplasm (cell contents) and a nucleus.
- CHOREA. Involuntary jerking of the muscles now in one part of the body, now in another.
- CLAUSTROPHOBIA. Fear of enclosed spaces.
- COMPLEX. A repressed, forgotten experience influencing mental functioning in a harmful way; spoken of as "buried" in the sub-conscious and charged with emotional energy.
- CONATIVE. Word used to describe the *dynamic* aspect of impulses, desires, etc.
- CONVERSION. The manifestation of an emotion as a physical symptom.
- CORTEX. Bark or outer covering. Term applied to the gray matter that spreads over the brain.

D

- DEMENTIA PRAECOX. Term used by Kraepelin to designate a mental disease caused by a disordered functioning of the sex glands.
- DROMOMANIA. (Wanderlust.) Impulse to wander.
- DYNAMOMETER. Instrument for measuring the force of the grip of the hand.

E

- ECHOLALIA. A psycho-neurotic symptom. The repeating of a set of words or of the last words heard.
- ECHOPRAXIA. The repetition, by imitation, of movements seen.
- EPISTEMOLOGY. A science dealing with the theory of knowledge and its validity.
- ERGOGRAF. Instrument for measuring the amount of work done by a group of muscles; used in the study of fatigue.
- ERYTHROMANIA. Compulsive blushing (reddening).
- ERYTHROPHOBIA. Fear of the color red.
- ETIOLOGY. Scientific knowledge of origins, development and causes.
- EXHIBITIONISM. Perverse sexual tendency towards exposing the person.
- EXTROVERSION. The turning of one's interests towards the outside world. The *introvert* is preoccupied with self-analysis and morbid introspection.

F

- FETECHISM. A perverse sexual interest in articles or pieces of apparel connected with the person or object loved.
- FIXATION. Morbid affective attitude of child towards a parent.
- FORECONSCIOUS. (Preconscious.) Term applied to recallable memories, experiences, etc. To be distinguished from *actual consciousness* and from the *sub-conscious* or *unconscious*.
- FUGUE. Flight during an unconscious or somnambulistic state; an hysterical symptom. The *fugitive* has subsequently no recollection of what happened, or why he fled.

H

- HALLUCINATION. An imaginary sensation to which no objective reality corresponds.

- HELIOTROPISM. A movement towards the sun (if positive), or away from the sun (if negative).
- HETEROSEXUAL. One who is attracted by those of the opposite sex.
- HOMOSEXUAL. Abnormal tendency towards those of the same sex.
- HYPNOSIS. A more or less abnormal state of suggestibility brought about by suggestion.
- HYSTERIA. Abnormal mental state, or *psycho-neurosis*, characterized by pathological suggestibility.

I

- IDEOMETER. Tendency of idea to realize itself in action.
- INHIBIT. To block or prevent by mental or nervous control.
- INNERVATE. To supply with nervous stimulation.
- INTROVERT. (Cf. *Extroversion*.)

K

- KATATONIA. A certain abnormal bodily rigidity, as a result of which peculiar attitudes are maintained for long periods.
- KINAESTHESIA. Awareness of muscular movements.
- KLEPTOMANIA. The impulse to collect or steal things.

L

- LESION. Injury; locus of infection or degeneration.
- LEUCOCYTES. White corpuscles found in the blood.
- LIBIDO. Term used by Freud to cover basic bodily urge and craving; fundamentally sexual, according to his view.

M

- MANIC-DEPRESSIVE. Psychosis, or form of insanity marked by alternating states of excitement and depression.
- MASOCHISM. Condition of sexual perversion in which a person derives pleasure from being dominated or even cruelly treated.

MEGALOMANIA. Delusion of personal greatness; a "swell-head."

METABOLISM. The building up and breaking down processes in living tissue.

METAZOA. Animals whose organism consists of more than one cell, as opposed to *protozoa*, unicellular animals.

N

NARCISM. (From *Narcissus*.) Mental habit of seeking gratification in self-study and self-admiration.

NARCOTOMANIA. Impulse to take drugs, — to leave the real for the unreal world of fancy.

NEGATIVISM. Mental attitude of contrariness and opposition to every suggestion that others make.

NEURASTHENIA. Functional mental disorder marked by deficiency of nervous energy, and having as symptoms fatigue, irritability, etc.

NEURON. Unit of the nervous system. A nerve cell with its prolongations; axon, dendrites, etc.

NEUROPATHIC. Abnormal in regard to condition of nerves and mental state.

NEUROSIS. Properly, this term should be used only of *physical* disorders for which no anatomical basis can be found. It is, however, actually used of *mental* disorders, as in the term "war neuroses." *Purely mental disorders* are called *psycho-neuroses*.

O

OEDIPUS COMPLEX. A son's morbid attachment to, or fixation on, his mother, — with hostility to father. The converse state, of daughter towards father, is called the "Electra-Complex."

ONOMATOMANIA. The impulse to repeat certain words.

ONTOGENETIC. Pertaining to the development of the embryo or individual.

OVUM. The egg, or female reproductive cell.

P

- PARANOIA. Form of mental disorder accompanied by suspiciousness, misinterpretation of the actions of others, and by the weaving of fantastical plans and schemes.
- PARESIS. Syphilitic disease of the nervous system culminating in paralysis and complete dementia.
- PHENOMENON. (Pl. *Phenomena*.) Occurrences; incidents; objective facts.
- PHOBIA. Abnormal fear or anxiety.
- PHOTOTROPISM. Movement in the direction of or away from light.
- PHYLOGENETIC. Pertaining to the development of the race. (Cf. Ontogenetic.)
- PHYSIOLOGY. Science which deals with the functioning of bodily organs, glands, etc. It includes respiration, circulation of the blood, digestion, vital metabolism, etc.
- PRAECOX. Term used to designate an introvert, the self-sufficient type of person who turns his back on the outside world and suffers from delusions of greatness. He belongs to the "dementia praecox" class.
- PROGNOSIS. The probable outcome of a disorder.
- PROPHYLAXIS. Method of preventing disease.
- PROTOZOA. Unicellular animals; *e.g.*, amoeba. (Cf. *Metazoa*.)
- PSYCHASTHENIA. Nervous weakness; lack of mental energy, decisiveness and control.
- PSYCHIATRIST. One who treats the disorders of the mind by psycho-therapy.
- PSYCHOGENETIC. Produced by the mind and its mechanisms in contrast to organic or somatic development; *i.e.*, produced by organs of the body.
- PSYCHO-NEUROSIS. (Pl. *Psycho-neuroses*.) Disorders of a purely mental (psychogenic) nature, without any anatomical basis; *e.g.*, hysteria, obsession, neurasthenia proper.
- PSYCHOSIS. Technical generic name for insanity.

PSYCHO-THERAPY. Application of the mental influence in the treatment and ultimate healing of nerve disorders.

PYROMANIA. Impulse to set things on fire. Abnormal interest in fire.

R

REFLEX. Mechanical nervous response of a muscle or gland to a sensory stimulus. Most reflexes take place quite unconsciously.

REPRESSION. Term applied by Freudians to the driving of painful experiences from consciousness into the "unconscious." *Suppression* is used in a kindred sense, when the "repression is deliberate."

S

SADISM. Sexual gratification through the inflicting of pain and injury on others.

SOMATIC. Pertaining to or arising from the body.

SPERMATOZOON. The male element that fertilizes the female ovum.

SUBCONSCIOUS. A "region of the mind" or a "store of experiences" normally inaccessible to consciousness, but actively influencing opinions, likes and dislikes, etc.

SUBLIMATION. Employment of psychical energy, belonging to a primitive instinct, in higher channels of creative endeavor.

SUGGESTIBILITY. Readiness to realize, act upon, or be influenced by a suggestion.

SUGGESTION. The sub-conscious realization of an idea.

SYNAPSIS. The junction between two neurons in the nervous system.

T

TELEOLOGICAL. Showing design or purpose.

TELEPATHY. Transference of thought without sensible signs; *i.e.*, without words or symbols of any kind.

TIC. Recurrent muscular contractions usually of a signifi-

cant kind; *i.e.*, shrugging the shoulders or arching the eyebrows. *Ticquers* are those who suffer from *Tics*.

TOXIN. Strictly a bacterial poison, but used synonymously with poison in general.

TRAUMA. Properly an external, physical injury, but also used as a term for "mind wound" or shock.

U

UNCONSCIOUS. (Cf. *Sub-conscious*.)

V

VITALISM. Theory which explains the phenomena of life as due to the vital principle; *i.e.*, the soul or spirit. Some try to explain the phenomena of life in terms of chemical and physical reactions.

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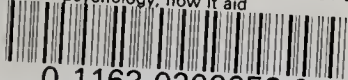


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